

Questions and Answers
Statewide Health Care Facility Transformation Program II (Phase 2)
RFA # 17648 / Grants Gateway # DOH01-SHCFT2-2018

Q#	Category	Question	Answer
1	Advanced Funding	If awarded, could our hospital receive an advance to help design the Eligible Project? Can grant funds be drawn down directly to pay invoices?	No. This is a reimbursement grant. The awardee must incur eligible expenses and submit a Claim for Payment/Voucher and supporting documentation for reimbursement.
2	Amount of Funding	In the event the 2018-19 enacted state budget includes additional funding that can be made available under Statewide II, at the option of the Commissioner, (similar to the process that evolved for Statewide I), will applicants be: (1) informed of the additional amount of funds that will be made available; and (2) allowed to amend their project funding request in light of an increase in the overall amount of funding that would be available under this RFA?	It is not possible to speculate on the 2018-19 state budget.
3	Amount of Funding Request	What is the average award? What is the maximum award? How will awards be calculated?	There are no minimum or maximum amounts for funding requests. The intent of the Statewide Health Care Facility Transformation Program II (SHCFTP II) is to fund as many eligible applications as possible. The strength of an application and the likelihood that it will be evaluated positively is largely dependent on the overall approach taken by the applicant to improve their long-term financial sustainability and/or protect and strengthen access to health care services in the community. Per statute, priority in determining an award is given to projects that were not awarded a grant in response to the RFA for the Statewide Health Care Facility Transformation Program I. Also, a minimum of \$46,995,507 of the \$203,782,888 in total funding will be awarded to community-based providers. If an Eligible Applicant submits multiple applications for funding under this RFA, the Eligible Applicant should assign a priority to each application where indicated in the application. DOH will review applications to determine the appropriate level of public investment needed for the Eligible Project, and the final amount of each Eligible Applicant's total award will be determined based upon the criteria set forth in Section III-C. In determining the amount of your funding request, please be mindful of the total amount of funding available and the amount that must be awarded to community based providers, while also achieving an equitable geographic distribution. Applicants are advised to put forward their best efforts in thoroughly completing and fulfilling all requirements of the RFA.
4	Amount of Funding Request	Is there a limit on award amounts?	See answer to question #3.
5	Application Due Date	Will the due date be extended from March 14? Grants Gateway originally indicated the date of availability was December 7, 2017 which was not the case. The site has been updated to reflect the actual date of January 8, 2018 but the due date remains the same.	The application due date has been extended to Thursday, March 22, 2018, by 4:00 PM EST.
6	Audited Financial Statements	RFA page 22, Section V. 6 - If a hospital system is applying on behalf of a hospital that it will soon affiliate with as an active parent, should audited financial statements be included for both the hospital system as eligible applicant and the affiliated hospital?	One organization must be selected to serve as the Eligible Applicant and this organization must meet the minimum eligibility requirements in Section II, Who May Apply, of the RFA. The Eligible Applicant must be the entity who will enter into a grant contract with the state. The Eligible Applicant is required to submit three year of audited financial statements. It is not a requirement of the RFA to submit three years of financial statements of the partner agency that is potentially going to affiliate with the Eligible Applicant. To the extent that the financial information of the proposed partner agency supports your application, the financial information can be submitted as supporting documentation to the application.

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7	Audited Financial Statements	What provisions are being made for applicants that are new entities and will not have the three years financials?	Entities whose financial statements have not been subjected to an audit may submit unaudited financial statements and a signed attestation from an authorized officer of the entity certifying that an audit of the entity's financial statements is not conducted and why, and also certifying as to the source, accounting methods applied, and accuracy of the financial information submitted.
8	Budget	Is an applicant allowed to include contingency costs (a fixed percentage, based on average past experience) as part of its capital budget? If so, should applicants place this in the "Other" expense category in Grants Gateway as well as in rows 20 and/or 21 of Attachment 3, tab 2 "Use of Funds"?	Yes. Contingency costs up to 5% for new construction and up to 10% for renovation costs may be eligible. Eligible costs should be categorized in relevant expense categories (i.e. scoping, design, or construction).
9	Budget	Is an application allowed to include a line item (a small percentage such as 3%) for anticipated cost escalation (accounting for rising prices between the time of application preparation and the time of construction)? (This would be separate from contingency.) If so, should applicants place this in the "Other" expense category in Grants Gateway?	Applicants should provide the best cost estimates possible and consider in their responses the timing of the costs.
10	Capital versus Non-Capital Priority	Would it be looked upon favorably for a hospital system and one of its affiliated hospitals to each apply for two different projects that pertain to the affiliated hospital – one for a capital project and one for a non-capital project?	Not enough information is provided for the Department to comment on how favorably the applications described would be evaluated.
11	Capital versus Non-capital Projects	If we are submitting a capital and non-capital application for the same project, do we need to assign priority order? Keeping in mind that the project will not move forward if both are not funded.	Separate applications are required for capital and non-capital projects. The Eligible Applicant should assign a priority to each application if separate applications are submitted. The Eligible Applicant is not required to rank projects within an application. It is important for Eligible Applicants to indicate if the capital and non-capital projects are interdependent and cannot be completed unless both are funded. The Applicant should state this interdependence in Grants Gateway under <u>Program Specific Questions, 3 PROJECT DESCRIPTION</u> .
12	Capital versus Non-capital Projects	Can we include capital and non-capital expenses in one grant?	See answer to question #11.
13	Capital versus Non-capital Projects	Is an applicant allowed to combine a request for debt relief and a capital project in one application, if the capital project depends upon the debt relief in order to be implemented? For example, may an applicant seek \$5 million in debt relief in order to assist with funding a \$10 million capital construction project, if the debt relief will then enable to the applicant to fund the capital project and obtain more favorable financing? Is the answer dependent on whether or not the applicant seeks SHCFTP 2 funding for the capital project, in addition to the debt? For instance, if the applicant seeks SHCFTP 2 funding only for the debt relief, and proposes to fund the capital project through non-SHCFTP 2 means, we believe both projects would be described/proposed in a single application. But if the applicant seeks SHCFTP 2 funding for debt relief, and also seeks SHCFTP 2 funding for all or part of the related capital project, we believe two applications would be required.	See answer to question #11.
14	Certificate of Need (CON)	In order for an applicant to submit an application that has a CON component, does the applicant need to already have an approved CON prior to submitting their SHCFTP 2 application? OR Can the CON process be ongoing at the time of submission?	No. CON approval is not needed at time of application submission.
15	Certificate of Need (CON)	Certificate of Need (CON), referenced in Section III B and the application questions: Would a program that has pre-approval from OASAS (1-A approval) and signoff by the LGU with jurisdiction of the planned project site still need to complete a CON?	Pre-approval by another agency does not negate the need for Article 28 CON approval by the Department of Health, if required. Specific CON submission requirements may be found at www.health.ny.gov/facilities/cons/more_information/

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16	Certificate of Need (CON)	We have begun the Certificate of Need application process to establish a new Article 16 clinic at a facility we own. We would like to apply for SHCFTP II funds to support the capital renovation costs. 1) Would an Article 16 Clinic be considered an eligible applicant type? This is not listed as a category on the application/cover sheet. If the Article 16 is eligible, how would we respond to this item? 2) Must we have full DOH approval of the CON before we can submit our SHCFTP II application?	1) Article 16 clinics are OPWDD-certified treatment facilities that operate pursuant to Article 16 of the Mental Hygiene Law and are, therefore, Eligible Applicants pursuant to statute. An Eligible Applicant must meet the minimum eligibility requirements at the time the application is submitted. 2) CON approval is not needed at time of application submission.
17	Certificate of Need (CON)	Can a facility, (a For-Profit Skilled Nursing Home), apply or request funds for a pending construction project which is currently under construction, with an approved Limited Review CON application? If so is there a time period or date as to when the approval or construction was issued or began?	No. Grant funds will not be used to support projects already under construction prior to the contract start date. Consideration could be given to pre construction costs for projects not yet under construction. Only expenses determined allowable under the contract budget and work plan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Per the RFA, the estimated start date of the contract is July 6, 2018.
18	Certificate of Need (CON)	If a project has previously received CON approval, with funding proposed by means other than SHCFTP 2 grant funding, would it still be eligible to receive SHCFTP 2 funding?	Yes, an Eligible Applicant could be eligible for Statewide II funding for a project that is not yet under construction.
19	Change in Project Post-Award	Can a project change location post-award and still receive funding? We are looking at a few locations for an expansion of services, but they would be in the same city.	Yes, it may be possible for an approved project to change locations after receiving an award. However all post-award changes are subject to reassessment by the DOH related to whether it meets all eligible award criteria for which the grant was awarded.
20	Community Engagement	Page 22, Question 4D of the RFA asks how has the “Applicant ..engaged the community affected by the Eligible Project and the manner in which community engagement has shaped the project”. Could the Department please give some examples as to what activities would be acceptable to constitute acceptable community engagement to meet this RFA requirement?	It is up to the applicant to determine how best to engage the community they serve. Community engagement should include, however, evidence that the Eligible Applicant has solicited input from community stakeholders who will be impacted by the Project.
21	Community Need Assessment	Question 4a ii states: “Discuss the adequacy of service capacity in the community. <i>The analysis of service capacity should be based on data on service volume, occupancy, and utilization by existing providers.</i> ” Service volume, occupancy, and utilization data are almost never available from individual community providers. If any of data is accessible, sexual and reproductive health services – especially specialized services such as abortion or long-acting reversible contraception insertion – cannot be disaggregated from broader categories such as outpatient, primary, or surgical services. Does NYSDOH have links or resources to data on service volume or capacity at the county-level or neighborhood-level that we might obtain to fully respond to this question? In the event that this isn’t available, is it acceptable to work with as much data as we have regarding volume at other providers, such as hospitals, in the same or adjacent geographic areas?	All Eligible Applicants are expected to demonstrate that they have assessed the health status of the residents of the community or communities that will be served, and adequacy of service capacity, using data that is available to them. See Section V. Completing the Application, 5. Identified Community Need. It is up to the Applicant to determine if the community need assessment satisfies the requirements of this RFA and that the data used is current. The Department of Health makes a wide range of data available, at no cost, to all partners through Health Data NY: https://healthdata.ny.gov/ .
22	Contract Date	Can the funds be used for build out costs that will be incurred in February and March?	Only expenses determined allowable under the contract budget and work plan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Any obligations assumed by the contractor prior to execution of the contract are assumed at-risk. Per the RFA, the estimated start date of the contract is July 6, 2018.
23	Contract Date	I see that the opportunity is due in March and suggests contracts in June. Any chance this is real time wise? We have an obvious project but are fearful of a substantial delay which happened with our CRFP award. This this round will be more timely? Tough to plan/partner otherwise.	See answer to question #22.
24	Contract Date	Can an awardee charge funds retroactively to this grant? More specifically, theoretically, if we were starting merger conversations with another agency this month, could we start charging to this grant in January or February, knowing that we won't get that money until much later?	See answer to question #22.
25	Contract Date	Can soft costs incurred prior to the start date of the grant be included as part of the grant request?	See answer to question #22.
26	Contract Date	Will retroactive payments be available for prior work that has been completed?	See answer to question #22.
27	Contract Date	If awarded a grant, can funds be spent before an organization receives a signed Master Contract as long as the funds are spent on or after the contract start date (estimated date now being 7/6/18)?	See answer to question #22.

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28	Contract Date	Are there restrictions with regards to when funds may be expended?	See answer to question #22.
29	Cost Savings	On page 22 of the RFA Question 8 asks for demonstration of cost savings from the project. Can the Department give some examples of acceptable area of cost savings? For example, would reductions in avoidable ER visits and inpatient admissions be acceptable measures of cost savings?	The quality of the Eligible Project will be judged based on how well it contributes to enable the Eligible Applicant to achieve financial sustainability and strengthen and protect continued access to essential health care services in the community. The DOH Review Team will evaluate the applicant's response to RFA Section V. Completing the Application. Describing and quantifying to the extent possible how the Eligible Project(s) will result in cost savings to the health care system, which may include reducing avoidable ER visits and unnecessary inpatient admissions, is one component of V. Completing the Application.
30	Cost Savings	For question 8 "Cost Savings" on page 22 of the RFA, can you briefly clarify the intended scope of "the health care system" across which applicants are expected to quantify how the Eligible Project will result in savings? May/should applicants focus on the savings at the agency level, or savings across the state (or other geographic area), assuming that the proposed project could reduce hospital visits and improve efficiencies, for example?	See answer to question #29.
31	Debt Relief	If we are project is to use funds to retire debt, for the work scope, should we just include activities specifically related to the project (i.e. the process of retiring debt) or should we include long-term activities we will carry out as a result of cost savings to the organization?	Debt restructuring may cover long-term liabilities such as mortgage loans, capital leases, and other debts due to mature in more than one year. The application should indicate how repayment of proposed debts will strengthen and protect continued access to health care services and foster financial sustainability through mergers, consolidation and restructuring activities. Additional documentation can include: audited financial statements, if available; loan agreements; or lender statements reporting loan amounts and payment history. Awards may be used to repay debt principal and/or interest.
32	Debt Relief	Does Debt Restructuring include Pension relief?	Yes, debt restructuring costs do include pension liabilities that are classified as long-term liabilities, and the payment of these liabilities are eligible expenses. However, given that pension liabilities are usually significant in nature and the limited funding available under this RFA and the goals of the RFA, it may not be possible or a priority to fund pension liabilities.
33	Debt Relief	Will retirement of pension obligations be considered under debt relief?	See answer to question #32.
34	Debt Relief	Is pension liability debt eligible for debt restructuring under Transformation Program II?	See answer to question #32.
35	Debt Relief	Are employee pension funds eligible for funding (to reduce the pension obligation of the applicant) through the debt relief/non-capital component of SHCFTP 2?	See answer to question #32.
36	Debt Relief	If a debt relief proposal is submitted, is a refinancing of remaining debt required or encouraged?	Refinancing of remaining debt is not a requirement.
37	Debt Relief	If an organization is requesting debt relief, must this be accompanied by a new program?	No. A new program is not necessary a requirement. However, the debt relief proposal will be reviewed against RFA Section III. Project Narrative/Workplan. C. Evaluation Criteria.
38	Debt Relief	Are Comprehensive Outpatient Program Services (COPS) debts to the New York State Office of Medicaid Inspector General and New York State Department of Health eligible for debt restructuring under Transformation Program II?	If the debt retirement is a long-term liability it may be an eligible expense subject to RFA Section III. Project Narrative/Workplan. C. Evaluation Criteria. Further comment is not possible given incomplete details.
39	Debt Relief	Our organization would like to retire a long term debt incurred prior to becoming an FQHC which would greatly assist in building solvency and a healthier financial future for us. Our debt is a non-interest one and is owed to another healthcare facility. It would not involve a merger. Would this be considered an eligible expense? AND, would this impact the other health facility's application?	See answer to question #38.

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40	Debt Relief	Another entity is merging with our organization. Is debt incurred by the entity that will become our organization's responsibility when merged eligible for debt restructuring under Transformation Program II if we are not fully merged by March 14 2018?	The Eligible Applicant must also be the entity directly liable for the debt identified in the application and must meet the eligibility requirements specified in Section II, Who May Apply. If the entity is merged into another organization and the debt becomes the liability of the surviving entity, it may be possible to assign the contract and pay off the identified debt if the surviving entity is also an eligible applicant for the funds. Specifics would need to be evaluated on a case-by-case basis.
41	Debt Relief	For an non-capital/debt retirement request, can an eligible applicant apply to pay off another entity's debt, if the entity is a related company to the applicant?	See answer to question #40.
42	Debt Relief	Another entity is merging with our organization. This entity is a guarantor on mortgage debt and other debt that is held by one of their related entities. Is this debt eligible for debt restructuring under Transformation Program II?	See answer to question #40.
43	Debt Relief	We have 3 related companies that consolidate into one entity. The company that provides all the administrative functions like billing, finance, human resources, IT etc. has outstanding debt on a building they acquired to accommodate the growing company needs. The costs of the administrative company are incurred exclusively for the two service companies that operate the Article 31 and 32 programs. The costs are allocated to them at zero mark-up. This building has an outpatient mental health practices located within. Would the debt of the administration company(that ultimately becomes the cost of the outpatient programs) be eligible for consideration under Phase 2 of this grant?	See answer to question #40.
44	Debt Relief	During the last round of applications, there appeared to be a discrepancy in Q&A responses I'd like to seek clarification on. Question 137 asked if paying off an "outstanding balance on a line of credit" for a "commercially revolving line of credit agreement with a bank" is eligible under non-capital projects. The response was "retirement of lines of credit may be an eligible expense if it assists in achieving the goals of the Plan" (my emphasis). Question 180 asked if "a line of credit with our bank" is an eligible project since lines of credit are a short-term liability. The response was "short-term liabilities described are not eligible expenses." My question is: can we apply to retire debt owed to a commercially revolving line of credit agreement with a bank (which would be a short-term liability)?	Short-term liabilities are not an eligible expense.
45	Debt Relief	Are workers compensation liabilities eligible for funding (to reduce the obligation of the applicant) through the debt relief/non-capital component of SHCFTP 2?	Workers compensation liabilities which are long-term liabilities, may be an eligible expense.
46	Debt Relief	If debt was restructured a year ago, can it be included in this opportunity?	Yes, if the restructured debt remaining is a long-term liability.
47	Debt Relief	My organization is applying for RFP #17648, the Health Care Facility Transformation grant. We are applying for debt restructuring. Several of the sections of the RFP are geared toward contracting building renovations. Please tell me specifically which sections of the RFP we are required to complete. Can we simply write Not Applicable in sections that are not needed? It seems that the website requires every section to be completed.	Applicants must reply to each Grants Gateway question and respond to the best of their ability in light of the requirements of the RFA.
48	Debt Relief	With regard to "debt restructuring and refinancing of long-term liabilities," how is long-term defined? Is it possible to include any costs or actions associated with short-term liabilities?	Long term debt is defined as debt duration for a period exceeding one year. Short-term debt is not an eligible expense.

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49	Eligible Applicant	Would it be possible to apply jointly? For example, if three hospitals want to submit an application for shared services? If so, for purposes of the application, do we have to select only one organization to serve as the applying/lead agency?	<p>An application must have one Eligible Applicant and the project as proposed in that application must primarily benefit the Eligible Applicant.</p> <p>If the project requires the involvement of more than one entity: (a) The Eligible Applicant may subcontract with other entities to complete the project. However, the Eligible Applicant is the entity that will enter into a grant contract with the state and will be financially responsible for incurring and paying all costs prior to reimbursement. (b) Alternatively, each entity may submit a separate application characterizing its specific project costs and impacts, so long as each entity meets eligibility requirements specified in Section II, Who May Apply.</p> <p>Where a project involves multiple interdependent applications, each application should reference and discuss these interdependencies.</p>
50	Eligible Applicant	How does DOH define "Primary Care Providers" as eligible applicants? Can you please provide the exact definition? I am looking into this for a community-based organization who is NOT currently registered in grants gateway, and we need to first be certain they are eligible before going through the GG enrollment process.	Primary care providers include individual or group primary care providers, as long as the primary care provider meets the minimum eligibility criteria outlined in Section II. Who May Apply. A primary care provider must be certified under title eight of the education law or a lawful combination of such health care practitioners, such as an independent practice association (IPA).
51	Eligible Applicant	Regarding the eligibility of community-based healthcare providers, please provide a definition of "primary care provider."	See answer to question #50.
52	Eligible Applicant	Would a community-based multispecialty group that provides both primary care and specialty care be an eligible applicant if 50% of its services are primary care and 50% are specialty care?	See answer to question #50.
53	Eligible Applicant	More info on private practices...	See answer to question #50.
54	Eligible Applicant	My agency is a management organization that pays considerable attention to working with medical and health care institutions, practitioners, pharmaceuticals and other specialized legal and physical persons necessary to provide maximum assistance to patients/patients populations. Programs consist of providing medical care for patients/patients/populations in emergency situations, restoring and preventing health, providing further medical supervision, providing them with psychosocial support, organizing their vocational rehabilitation and vocational training, and creating opportunities for them. education, community integration and appropriate support from these communities. Can we become eligible for a grant from the New York State Department of Health? In the organization there is a primary care provider that comply with the eligibility requirements of grants. Does this primary care provider apply on behalf of the agency?	See answer to questions #49 and #50.
55	Eligible Applicant	On pages 4 and 5 of the RFA materials, section II speaks about who may apply. Bullet point (b) specifies the types of provider organizations that are eligible. If a prospective applicant intends to obtain licensure for a certain RFA eligible program (ie: the prospective applicant is not yet certified or licensed under Article 32 of the MHL but intends to apply in the coming months and obtain certification and licensure), are they eligible to apply for and potentially receive grand funding under this RFA? Or, does the prospective applicant need to have certification or licensure in place prior to applying under this RFA? As some additional information, the prospective applicant currently operates several nursing home facilities in NYS. Does this fact qualify the prospective applicant to apply under this RFA even though the prospective applicant does not intend on applying for grant funding related to an Article 28 facility?	Section II. Who May Apply, specifies who are Eligible Applicants. An Eligible Applicant must be a legally existing organization and capable of entering into a binding Master Grant contract with DOH, be one of the types of provider organizations listed, and deemed by the Commissioner to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, or residential health care services in a community. An Eligible Applicant must meet these minimum eligibility requirements at the time the application is submitted. The proposed project should align with the licensure the applicant is using to demonstrate eligibility for this grant funding.
56	Eligible Applicant	We have participated in the Webinar and were informed about the criterions of eligibility who may apply. In our organization there is a primary care provider that meets the eligibility requirements of grants. Can this primary care provider apply on behalf of the agency? Or can we apply directly on behalf of organization?	See answer to questions #49 and #55. Eligible Applicants should not apply for projects to benefit affiliates that are ineligible applicants.

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57	Eligible Applicant	Are Federally Qualified Health Center (FQHC)s eligible to apply?	Yes, FQHCs are Article 28 Diagnostic and Treatment Centers and are a community-based health care provider for the purposes of this RFA.
58	Eligible Applicant	I am the new COO/Information Officer for a behavioral health IPA. The members of the IPA are licensed mental health, substance use and residential health care providers. Would we qualify as an eligible organization to apply and respond to this RFA?	See answer to question #50. Also, mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL), and alcohol and substance abuse treatment clinics certified or licensed under Article 32 of the MHL, are Eligible Applicants. An Article 31 licensed hospital is not an Eligible Applicant. However, an Article 31 hospital that is dually licensed under Article 28 of PHL is an Eligible Applicant under Section II(b) of the RFA as long as they meet the other minimum eligibility requirements of Section II of the RFA. Residential health care facilities licensed under Article 28 of the PHL are also Eligible Applicants.
59	Eligible Applicant	I would like to know whether Freestanding Mental Health Facilities are eligible for this program.	Mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL) are Eligible Applicants. An Article 31 licensed hospital is not an Eligible Applicant. However, an Article 31 hospital that is dually licensed under Article 28 of PHL is an Eligible Applicant under Section II(b) of the RFA as long as they meet the other minimum eligibility requirements of Section II of the RFA.
60	Eligible Applicant	Does this apply to freestanding Psych facilities?	See answer to question #59.
61	Eligible Applicant	We are trying to determine if we are eligible for this grant. We have not yet opened our Article 31 but we currently provide B2H services and are designated for HCBS/SPA services. Would this suffice? I just want to clarify - our PAR application was submitted and under review. We expect to open July 2018.	Mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL), and alcohol and substance abuse treatment clinics certified or licensed under Article 32 of the MHL, are Eligible Applicants. An Article 31 licensed hospital is not an Eligible Applicant. However, an Article 31 hospital that is dually licensed under Article 28 of PHL is an Eligible Applicant under Section II(b) of the RFA as long as they meet the other minimum eligibility requirements of Section II of the RFA. Residential health care facilities licensed under Article 28 of the PHL are also Eligible Applicants. An Eligible Applicant must meet these minimum eligibility requirements at the time the application is submitted.
62	Eligible Applicant	Under Section II, Who May Apply, on page 5 it states, "Mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL)" Four Winds Hospitals are private for profit facilities licensed by OMH under Article 31 as Psychiatric Hospitals does the above criteria for eligibility include these facilities as well?	An Article 31 licensed hospital is not an Eligible Applicant. However, an Article 31 hospital that is dually licensed under Article 28 of PHL is an Eligible Applicant under Section II(b) of the RFA as long as they meet the other minimum eligibility requirements of Section II of the RFA.
63	Eligible Applicant	Will OMH and OASAS clinics operated by a hospital be considered community based providers?	No. Mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL) are Eligible Applicants. An Article 31 licensed hospital is not an Eligible Applicant. However, an Article 31 hospital that is dually licensed under Article 28 of PHL is an Eligible Applicant under Section II(b) of the RFA as long as they meet the other minimum eligibility requirements of Section II of the RFA.
64	Eligible Applicant	Are these funds available to skilled nursing facilities/nursing homes?	Residential health care facilities licensed under Article 28 of Public Health Law are Eligible Applicants.

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65	Eligible Applicant	<p>I work for a hospice and was wondering if someone could provide some clarification as to who is eligible to apply for this grant. We operate a hospice residence and were hopeful that we could apply for this grant to expand our residence beds, if we were awarded funds. I have been looking at the list of those who are eligible but I wasn't sure where we would fit in. They were:</p> <p>(b) Be one of the following types of provider organizations:</p> <ul style="list-style-type: none"> • General Hospitals licensed under Article 28 of the PHL; • Residential health care facilities licensed under Article 28 of the PHL; • Community-based health care providers which, in accordance with statute and for purposes of this RFA, are defined as: <ul style="list-style-type: none"> o Diagnostic and treatment centers certified or licensed under Article 28 of the PHL; o Mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL); o Alcohol and substance abuse treatment clinics certified or licensed under Article 32 of the MHL; o Primary care providers; o Home care providers certified or licensed under Article 36 of the PHL. <p>Would our organization and project be eligible for this grant?</p>	An Article 40 hospice program is not one of the eligible provider types listed in Section II of the RFA and is NOT considered Eligible Applicants under this RFA.
66	Eligible Applicant	I am the foundation director for a hospice and we are starting construction on a new inpatient unit. We are an article 40 hospice...are we eligible to apply for funding under this RFA?	See answer to question #65.
67	Eligible Applicant	Can an Article 40 hospice apply?	See answer to question #65.
68	Eligible Applicant	Our question refers to eligibility criteria. Hospices are certified under PHL Article 40, which is not an entity included in the eligibility list. Are Hospices eligible to apply? I would argue that Hospice provides critical and essential health services in the community, contributes to NYS DSRIP goal to reduce unnecessary hospitalizations, and improves patient safety and welfare.	See answer to question #65.
69	Eligible Applicant	If you are not an article 28 are you still eligible to apply if you satisfy one of the other provider organization types?	Yes. Section II. Who May Apply, specifies who are Eligible Applicants. An Eligible Applicant must be a legally existing organization and capable of entering into a binding Master Grant contract with DOH, be one of the types of provider organizations listed, and deemed by the Commissioner to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, or residential health care services in a community.
70	Eligible Applicant	Does the applicant have to be a NYS Article 28 entity? Or, may a parent Corp. (located in another State that has a license "that is authorized to conduct business in NY") be the applicant, as well as the recipient of the funds?	Yes, an entity that is established as an Article 28 provider such as a parent corporation that is co-established as an Article 28 provider (an "active parent") is an Eligible Applicant as long as it meets the other minimum eligibility requirements in Section II Who May Apply of the RFA.
71	Eligible Applicant	Can the co-operator / Active parent / that is listed on the NYS DOH Operating Certificate, be the Applicant and Recipient of any grant funding of this RFA2?	See answer to question #70.
72	Eligible Applicant	Are Local Government Units (LGUs) also able to apply for funding?	Publicly operated providers are eligible to apply, as long as they meet the minimum eligibility criteria outlined in Section II. Who May Apply.
73	Eligible Applicant	The request outline indicates that government entities are eligible to apply for the program, but the full proposal seems to rule out this eligibility based on criteria indicated. Seeking clarification – can a LGU apply?	See answer to question #72.
74	Eligible Applicant	I was told by my local health department of mental health that this grant opportunity is open to both not-for-profit and for profit organizations but the literature online refers to non-profits only. Can you clarify this point	Not-for-profit and for-profit (proprietary) providers are eligible to apply, as long as they meet the minimum eligibility criteria outlined in Section II. Who May Apply of the RFA.

Q#	Category	Question	Answer
75	Eligible Applicant	Can an organization that received a SHCFTP I capital grant apply for a SHCFTP II capital grant? The grant already awarded was for an expansion of a clinic. The new proposal would be for renovation costs in an existing space and/or equipment costs.	Yes. Applicants that received awards under the Statewide I RFA are eligible to receive awards under Statewide II RFA. However, as stated in the RFA, projects shall not receive awards under both this RFA and the Kings County Health Care Transformation Program or the Oneida County Health Care Transformation Program.
76	Eligible Applicant	Can two separate providers make a single application together for eligible expenses as long there is some sharing of services and the budgets are separate?	See answer to question #49. One budget is required per application.
77	Eligible Applicant	For Phase 2 of the Statewide Health Care Facility Transformation Program, it indicates the dollar amount of funds available based on Phase 1. Does this mean you had to receive funds from Phase 1 in order to be eligible (or ineligible) for Phase 2?	No.
78	Eligible Applicant	Can one agency submit under two separate corporations?	There is not enough information provided to adequately answer.
79	Eligible Applicant	We are trying to confirm whether our client, a developmental disabled provider, is eligible to apply for this grant?	Pursuant to the statute and the RFA, mental health <u>clinics</u> certified or licensed under Article 31 of the Mental Hygiene Law are Eligible Applicants. Article 16 Clinics are OPWDD-certified treatment facilities that operate pursuant to Mental Hygiene Law, and are, therefore, Eligible Applicants. Individualized Residential Alternative and/or Intermediate Care Facilities (IRAs and ICFs), or other residential facilities are not clinics, and, therefore, are not Eligible Applicants.
80	Eligible Applicant	We have been informed that Article 16 clinics are eligible to apply for this grant. Please clarify that Group homes would also be eligible.	See answer to question #79.
81	Eligible Applicant	Do agencies supporting people in IRAs and ICF qualify for this grant?	See answer to question #79.
82	Eligible Applicant	In the Q&A for the 2017 health care facility transformation application, the State clearly answered that Article 16 clinics would qualify as eligible applicants under the authorizing legislation. In the current RFA for Phase II, under Section II (Who May Apply), there is (in sub-section b), a list of eligible types of provider organizations: (b) Be one of the following types of provider organizations: <ul style="list-style-type: none"> • General Hospitals licensed under Article 28 of the PHL; • Residential health care facilities licensed under Article 28 of the PHL; • Community-based health care providers which, in accordance with statute and for purposes of this RFA, are defined as: <ul style="list-style-type: none"> o Diagnostic and treatment centers certified or licensed under Article 28 of the PHL; o Mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law (MHL); o Alcohol and substance abuse treatment clinics certified or licensed under Article 32 of the MHL; o Primary care providers; o Home care providers certified or licensed under Article 36 of the PHL. In the above list from the Phase II RFA, Article 16 clinics are not specifically mentioned as eligible. As they were in the previous round, are Article 16 clinics eligible organizations under the Phase II RFA even though they are not specifically identified as eligible?	See answer to question #79.
83	Eligible Applicant	I am the Director of a 501 c3 agency whose operating license comes from the Office for People with Developmental Disabilities. We operate many group residence throughout the Bronx and Westchester for people with Intellectual and Developmental Disabilities. We currently support about 250 people in more than 35 different homes and apartments. Most of them are Certified IRA but some are ICF (Intermediate Care Facilities). In all of those residences, we are the primary care providers. We coordinate care regarding all aspects of daily living, including medical care. We have primary care physicians and nurses on salary, and each individual in our homes have an IAHD primary care physician. This physician will refer out to health centers when individuals need specialized medical care, through clinical evaluations, procedures, etc. Our question is this: Are we eligible to participate in the Statewide Health Care Facility Transformation Program II?	No. See answer to questions #49, #50 and #79. An Eligible Project must primarily benefit an Eligible Applicant.

Q#	Category	Question	Answer
84	Eligible Applicant	Can community based organizations operating OPWDD funded IRA's apply for this funding?	See answer to question #79.
85	Eligible Applicant	Can funds be used for OPWDD IRAs?	See answer to question #79.
86	Eligible Applicant	Can we apply for funding for group residences under OPWDD?	See answer to question #79.
87	Eligible Applicant	Are OPWDD certified residential providers an eligible applicant?	See answer to question #79.
88	Eligible Applicant	My agency is under OPWDD providing 24/7 health services in several residences. One third of our residents are in the geriatrics age group with its related medical problems. We would like to team up with a Geriatric department of a hospital to improve this service and reduce hospitalization rate. Are we eligible to apply for this grant?	See answer to question #79. An application can have one Eligible Applicant and the project as proposed in that application must primarily benefit the Eligible Applicant.
89	Eligible Applicant	Are only OPWDD clinics Eligible Applicants?	See answer to question #79.
90	Eligible Applicant	We are interested in applying for this grant, but unsure if our agency is eligible. Currently, we run an acute care / medication assisted therapy medical clinic at our agency using AIDS Institute grant funding. We work with a Primary Care Physician and two Nurse Practitioners who bill for all services under their practice (we are considered a "site" within her practice). We are hoping to apply for this funding to implement systems that would generate revenue for our clinic and allow us to pursue Article 28 designation as our own entity. Based on our current model would this qualify us for this funding opportunity? If not, could our medical director apply for funding using her license/article 28 status and direct the funds to our specific site within her practice?	RFA Section II. Who May Apply, specifies who are Eligible Applicants. See also answer to question #49, that indicates an Application must have one Eligible Applicant and the project as proposed in that application must primarily benefit the eligible applicant.
91	Eligible Applicant	I see from the RFP that substance and abuse treatment clinics certified or licensed under Article 32 of the Mental Hygiene Law ("MHL") can be eligible applicants. My question is whether that includes inpatient substance use disorder facilities licensed under MHL Article 32?	Alcohol and substance abuse treatment clinics certified or licensed under Article 32 of the Mental Health Law (MHL), are Eligible Applicants. Inpatient alcohol and substance abuse facilities licensed under MHL Article 32 are not Eligible Applicants.
92	Eligible Applicant	Many hospitals also have a foundation. Should the Hospital apply for the grant directly or can the foundation apply on behalf of the hospital?	Applicants must meet the minimum eligibility criteria outlined in the RFA, Section II., Who May Apply.
93	Eligible Applicant	Can a non-profit foundation be the applicant on behalf of an eligible entity?	See answer to question #92.
94	Eligible Applicant	If you are a hospital-owned Article 31 or 32, will you be considered in the Hospital category or the Community Provider category?	Hospital owned Article 31 and 32 providers are considered a hospital provider for purposes of this RFA.
95	Eligible Applicant	Can a Continuing Care Retirement Community (CCRC), which serves as the operator of certain health care providers that are eligible under this RFA (residential health care facility) apply under this RFA?	No. CCRCs are not eligible applicants. See RFA, Section II., Who May Apply. Residential health care facilities licensed under Article 28 off the Public Health Law are eligible applicants.
96	Eligible Applicant	Is a Continuing Care Retirement Community (CCRC) licensed under Article 46 of the Public Health Law, which includes a nursing home licensed under Article 28 of the Public Health Law, considered to be an eligible applicant for purposes of: a. Acquiring an outside Article 28 nursing home that is not part of the CCRC; or b. Expanding and/or changing the licensure status of its on-campus adult home/assisted living facility?	See answer to question #95.
97	Eligible Applicant	Is an ALP that has as part of its organizational structure an Article 36 LHCSA or CHHA eligible to apply and receive funding? May an Article 36 LHCSA or CHHA that is a component of an ALP apply for funding that would be used for the housing component of the ALP?	RFA, Section II. Who May Apply, specifies who are Eligible Applicants. An Eligible Applicant must be a legally existing organization and capable of entering into a binding Master Grant contract with DOH, be one of the types of provider organizations listed, and deemed by the Commissioner to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, or residential health care services in a community.

Questions and Answers

Q#	Category	Question	Answer
98	Eligible Applicant	RFA page 20, Section V. 2 - If a hospital system is applying on behalf of a hospital that it will soon affiliate with as an active parent, should we include organization information on both the hospital system as eligible applicant and the affiliated hospital?	<p>An entity that is established as an Article 28 provider such as a parent corporation that is co-established as an Article 28 provider (an "active parent") is an Eligible Applicant as long as it meets the other minimum eligibility requirements in Section II Who May Apply of the RFA. One organization must be selected to serve as the Eligible Applicant and this organizations must be a legally existing organization and capable of entering into a binding Master Grant contract with DOH, be one of the types of provider organizations listed, and deemed by the Commissioner to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, or residential health care services in a community. An Eligible Applicant must meet these minimum eligibility requirements at the time the application is submitted.</p> <p>Applications from multiple applicants should only be submitted when the Eligible Project(s) being requested impact the financial sustainability of all applicants. The Eligible Applicant is required to submit three year of audited financial statements. It is not a requirement of the RFA to submit three years of financial statements of the partner agency that is potentially going to affiliate with the Eligible Applicant. To the extent that the financial information of the proposed partner agency supports your application, the financial information can be submitted as supporting documentation to the application.</p>
99	Eligible Expenses	I work for a 501©(3) organization that offers shelter and other services to young people ages 16-21. We also operate a FQHC. Is the Article 28 entity required to have an ownership interest in the building project proposed, or can it have a lease in the property?	Real property site control can be achieved by ownership or long-term lease.
100	Eligible Expenses	We are a county operated mental health and substance abuse safety net provider and are looking to move into a building that would improve safety and security as well as expand our integration. Could this grant be used to renovate a rental property for us or would we have to own the property?	See answer to question #99.
101	Eligible Expenses	Are M&A (mergers and acquisition) costs allowable? If so, are there restrictions/parameters?	As indicated in the SHCFTP II RFA, creation of a financially sustainable system of care should be associated with a merger, consolidation or significant restructuring activity and are Eligible Expenses. Restructuring activities encompass a broad array of approaches. The Department is using a broad interpretation of Corporate restructuring for the purposes of this Grant. Corporate Restructuring for the purpose of this grant could include, but is not limited to: Rightsizing services across a region or at a specific location; Conversion of Services to better align service delivery in a region along DSRIP goals; and, Traditional Corporate Restructuring.
102	Eligible Expenses	I am writing in hopes of clarification regarding an eligible expense in the Statewide Health Care Facility Transformation Program II RFA. Can the funds be used for to support the planning, design and construction of a new building?	Yes, capital costs related to the planning and design of a fixed asset, as well as construction costs, are Eligible Expenses under this RFA.
103	Eligible Expenses	We are a community-based provider and part of the Certified Community Behavioral Health Clinic (CCBHC) pilot, have both Article 31 and 32 licenses. We want to expand our off-site services to serve more people and increase billable services. Can these funds be used for capital to integrate services at an off-site location, such as a shelter or supportive housing programs?	<p>The applicant must be an Eligible Applicant. Pursuant to the statute and the RFA, mental health <u>clinics</u> certified or licensed under Article 31 of the Mental Hygiene Law are Eligible Applicants. Article 16 Clinics are OPWDD-certified treatment facilities that operate pursuant to Mental Hygiene Law, and are, therefore, Eligible Applicants. Individualized Residential Alternative and/or Intermediate Care Facilities (IRAs and ICFs), or other residential facilities are not clinics, and, therefore, are not Eligible Applicants. If an Eligible Applicant, the capital expenses identified are Eligible Expenses.</p>

Q#	Category	Question	Answer
104	Eligible Expenses	In considering a telemedicine application, we would like clarity regarding equipment and associated software: a. Can you please confirm that telemedicine carts/attached medical devices would be considered for funding, assuming they have a useful life of more than three years? b. Is software that is required to operate these carts and/or other telemedicine services eligible for funding? This software is not used for any other purpose than telemedicine. c. Is a monthly subscription for cloud-based telemedicine services eligible for funding if it is used in conjunction with telemedicine carts we and we present a sustainability plan for how we would continue to fund the subscription post-grant implementation? d. Is SAAS eligible for telemedicine workflow applications that are integrated with EMR systems?	a. and b. See answer to question #159. c. No, these are general operating expenses. d. Not enough information is provided to adequately answer.
105	Eligible Expenses	Recently, we have been working aggressively to shift how we've been billing for services at our onsite Adolescent Health Center. We are trying to shift our business model to Medicaid managed care contracts to be reimbursed for our services and enhance the sustainability of those services. This difficult transition will require a consultant to help us implement our wraparound Federally Qualified Health Center rates with NYS (submitted in December 2016 to NY State). We will also need to reconfigure our billing system (eClinicalWorks) to bill for our new rate and potentially reclaim back dated revenue. The reconfiguration of eClinicalWorks would allow us create more financially sustainable systems of care. We would like to know if the acquisition of a consultant and reconfiguration of our billing system, eClinicalWorks, is eligible under this RFP and would be considered approved expenses?	All projects proposed by eligible applicants will be evaluated by the extent to which they meet the criteria outlined on page 7 of the RFA. See also answer to question #159.
106	Eligible Expenses	Must the project proposal be for something new, or could an ongoing project be submitted? What about one that has been completed but not completely paid for yet?	Only expenses determined allowable under the contract budget and work plan and incurred on or after the start date of the contract may be vouchered for reimbursement.
107	Eligible Expenses	The RFP mentions that some non-capital expenditures may be considered. Must these expenditures be related to a specific capital project?	No, non-capital expenditures, such as debt relief, do not need to be related to a specific capital project. Non-capital costs related to start-up expenses do need to be related to a capital project. See RFA, III. Project Narrative/Workplan, B. Eligible and Excluded Expenses and Disallowed Costs.
108	Eligible Expenses	I work for a 501(c)(3) organization that offers shelter and other services to young people ages 16-21. We also operate a FQHC. Is the Article 28 entity required to have an ownership interest in the building project proposed, or can it have a lease in the property?	Real property site control can be achieved by the Eligible Applicant through ownership or long-term lease.
109	Eligible Expenses	If an eligible entity does not own the building in which they provide healthcare services, can it still apply? Is a long-term lease or some other documentation of commitment from the owner required, and if so, how long should the commitment	See answer to question #108.
110	Eligible Expenses	Are leasehold improvements eligible for funding through Statewide 2?	Capital costs associated with the renovation of leased space are eligible expenses. The terms of the lease must be evaluated on a case by case basis by DASNY bond counsel and are dependent on the useful life of the improvements to be made to the space and the terms of the applicable bonds.
111	Eligible Expenses	What is the minimum time left on a lease required in order to propose a capital project for that space under Statewide Health Care Facility Transformation II?	See answer to question #110.
112	Eligible Expenses	Is an applicant allowed to request/use funds to improve a site that either the applicant or a partnering organization is leasing over a long term, rather than owning?	See answer to question #110.
113	Eligible Expenses	If an applicant is planning a capital renovation to a leased space, are there any requirements by the state on that lease (e.g., length of lease, use of space, etc.)	See answer to question #110. The use of the leased space must be in accordance with the award for the Eligible Project.

Questions and Answers

Q#	Category	Question	Answer
114	Eligible Expenses	Section III; Item B: This item discusses "capital leases" and "operating leases". Do these terms relate to those used under the prior Accounting terminology for leases or have these terms been modified to reflect the new Accounting standards for leases?	Refer to Generally Accepted Accounting Principles.
115	Eligible Expenses	We are a smaller FQHC with a very long history in our main site, working in a very old building, on a very short lease in a very tight real estate market. We are in dire need of mission-critical capital funding to either refurbish the current structure, or ideally, find and refurbish a new building (long-term lease or purchase). Given the time constraints to meet the application deadline, it would be difficult to identify a new property and negotiate a long term lease. The RFP is mostly silent on what are the minimum requirements in such a situation. In short: a) How long does the lease have to be on a rented property to warrant real consideration by the State as a worthwhile investment? b) Does an applicant have to have a negotiated lease in hand, or would a Letter of Intent with our current or a future landlord suffice? c) Is it possible to request funding for a property we have not yet identified?	a) Capital costs associated with the renovation of leased space are eligible expenses and will be evaluated on a case-by-case basis. A long-term lease is required for bondability; b) A Letter of Intent is sufficient for the application, however, grant disbursement would be conditional on an acceptable lease; c) Yes, but the preferred location should be identified.
116	Eligible Expenses	We are an Article 32 addition services nonprofit and we would like to use these funds to lease a nearby space to create an FQHC with a partner who is a licensed Article 28 provider. We would be on the lease of the facility and our patients would use it for direct access to the services they need. Could we use this funding to support costs associated with a new FQHC that would be run by our partner?	One organization must be selected to serve as the Eligible Applicant and this organization must meet the minimum eligibility requirements in Section II, Who May Apply, of the RFA. The Eligible Applicant must be the entity who will enter into a grant contract with the state. Applications with multiple applicants should only be submitted when the Eligible Project(s) being requested impact the financial sustainability of all applicants. The Eligible Applicant is required to submit three year of audited financial statements. It is not a requirement of the RFA to submit three years of financial statements of the partner agency that is potentially going to affiliate with the Eligible Applicant. To the extent that the financial information of the proposed partner agency supports your application, the financial information can be submitted as supporting documentation to the application.
117	Eligible Expenses	What are the consequences if a project is funded and initiated, but then not successful?	The State reserves the right within the Master Contract to pursue available legal or equitable remedies.
118	Eligible Expenses	Can a portion of leadership salary necessary to oversee the capital project be included within the project budget as an eligible expense?	No.
119	Eligible Expenses	We have two questions regarding the SHCFTC II RFA funding availability for Non-Capital Projects or Purposes. Section III, Part B allows for funding that includes "debt restructuring including costs to reduce, retire or refinance long-term liabilities," with the purpose being to strengthen and protect access to services and to facilitate agency financial stability. Our questions concern whether the non-capital funding could be used to cover two specific types of debt: 1. Could a non-capital award be used to cover a pension plan deficit that was not sufficiently covered by our funding sources? 2. Could a non-capital award be used to cover debt to a funding source for administration costs not fully covered by our funding? 3. If repayment of these debts would be permissible under the RFA, would we need to submit separate applications for each debt or could the liabilities be combined in one application for the total amount of outstanding debt.	1) Debt restructuring costs include pension liabilities that are classified as long term liabilities, and the payment of these liabilities are eligible expenses. However, given that pension liabilities are usually significant in nature and the limited funding available under this RFA and the goals of the RFA, it may not be possible or a priority to fund pension liabilities. 2) Long term liabilities are generally an eligible expense. 3) Multiple debts proposed for repayment can be submitted under one non-capital application.
120	Eligible Expenses	Can you provide more clarification on the definition of "eligible expenses" for non-capital projects? We understand that start-up operational expenses are eligible under the RFA, but need clarity on which start-up expenses are allowed, and for how long. How is DOH defining "start-up expenses" vs. "general ongoing operating costs applicable to day-to-day operating expenses", as referenced on Page 7, Section III, Part B? Would salaries and benefits be an eligible expense if they were directly related to a capital project that would allow us to implement telemedicine at our health centers? If so, what is the longest duration we could cover those salaries and benefit expenses under a contract issued through this RFA?	Start-up operating expenses must be directly connected to and an incremental cost of the Eligible Project for which funding is being sought under this RFA. Start-up operating expenses are for limited brief period until program operating revenue is reasonably anticipated to support operations (case by case basis).
121	Eligible Expenses	Would you please specify the allowable length of the time period for start up costs that would be eligible for non-capital funding under the Statewide Health Care Facility Transformation Program II grant?	See answer to question #120.

Questions and Answers

Q#	Category	Question	Answer
122	Eligible Expenses	Page 6 of the RFA references that funds for Start-up operations directly related to the project may be requested. Could the Department provide additional clarification between what constitutes “start-up” funds as opposed to ongoing operating costs. For example, are furnishing for the initial outfitting of a new facility supported by the grant qualify as start-up funds? Do operating fund losses (Working capital) incurred during the start-up of a new project (While volume builds to projected levels to generate sufficient revenue) qualify as “Start-up” funds?	See answer to question #120. On-going operating deficits of an implemented project are not an eligible expense. See RFA, III. Project Narrative/Workplan, B. Eligible and Excluded Expenses and Disallowed Costs. Separate applications are required for capital and non-capital projects.
123	Eligible Expenses	We are an Article 28 RHC considering the closure of one of the occupied resident buildings on our campus as part of our overall transformation/restructuring Capital Project. The residents, who are predominately Medicaid funded, will be absorbed into remaining campus beds as they become available. Would the revenue loss associated with the reduction process qualify as an Eligible Expense under this RFP? If so, would this be submitted as a Capital or Non-Capital project?	No. Revenue loss is not eligible capital expense.
124	Eligible Expenses	If part or all of the use of transformation funds are used for debt pay down would nursing homes be eligible for participating in the shared savings program?	Only the refinanced portion of the debt is eligible. If a debt was paid off in total, then none of it is eligible. If only part of it is paid off, the part that was not paid off and is to be refinanced is eligible. If the award pays off the mortgage, any reimbursement for that portion of the mortgage would cease, nor would that portion be considered for shared savings.
125	Eligible Expenses	Can funding be used to support debt-restructuring for group residences for people with disabilities?	Pursuant to the statute and the RFA, mental health clinics certified or licensed under Article 31 of the Mental Hygiene Law are Eligible Applicants. Article 16 Clinics are OPWDD-certified treatment facilities that operate pursuant to Mental Hygiene Law, and are, therefore, Eligible Applicants. Individualized Residential Alternative and/or Intermediate Care Facilities (IRAs and ICFs), or other residential facilities are not clinics, and, therefore, are not Eligible Applicants.
126	Eligible Expenses	Will the grant fund telemedicine equipment and start up services in group homes funded by OPWDD that care for medically frail individuals?	The expenses described may be eligible expenses. The applicant must be an Eligible Applicant - see answer to question #125.
127	Eligible Expenses	A behavioral health IPA (a VBP Readiness program grantee) is seeking to make a subvention contribution and participate meaningfully in the governance of a not-for-profit (NFP) and state-authorized accountable care organization (ACO) being established to engage in Level 3 risk-based contracting for people with HIV/AIDS and other behavioral health conditions. Both the IPA and the ACO have been launched to enable NFP providers to participate in VBP contracting per NYS's timeline. In exchange for the contribution the ACO would be providing the IPA with a subvention certificate and the investment will be carried on the IPA books as an asset. The contribution from the IPA--as well as other potential ACO members--will be used to fund the ACO's financial reserve requirements, as required under New York law. Our question: Given that the subvention interest in the ACO will be treated as a balance sheet asset of the IPA and further goals of the Transformation program, can the IPA apply for a Transformation grant to be used for a subvention in the ACO (and will it qualify as an asset for the purposed of the grant)?	No. A subvention related transaction is not an eligible expense.
128	Eligible Expenses	We would like to include as “equipment” or “asset acquisition” the cost of one or more wheelchair-accessible vans to transport patients who cannot use public transportation. This will be important to assuring the ongoing availability and accessibility of health care services for these individuals. Would this be an allowable cost?	Vehicles are an eligible equipment expense.

Q#	Category	Question	Answer
129	Eligible Expenses	Can an OMH and OASAS licensed outpatient children's behavioral health agency apply for exterior security cameras for multiple sites to address the risk to the safety and welfare of the families that seek our help, as well as the staff that provide the care. On a continuum some sites are more secluded than others and all of them have blind spots in the parking areas. (1) Is the installation of security cameras with more than a three-year useful life allowable in the request for funding in Statewide 2? (2) If one of the capital projects to be applied for has already received an approval for funding from DASNY, to cover part of the project, is it allowable to apply for additional funding for the same project through the Statewide 2 RFP? (3) Is purchase vans (vehicles) with more than a three-year useful life allowable if it is use is to transport clients in a long-time OMH-funded respite program which requires transportation to offer the service.	(1) The applicant must be an Eligible Applicant. See answer to question #79. Per the RFA page 6, equipment costs are an Eligible Expense. (2) An Eligible Project receiving other state funds for a portion of a project may be eligible for grant funding under this RFA for the unfunded portion of the project. However, as stated in the RFA, projects shall not receive awards under both this RFA and the Kings County Health Care Transformation Program or the Oneida County Health Care Transformation Program. (3) See answer to question #128.
130	Eligible Expenses	Can an Article 28 RHCF as an Eligible Applicant, as part of their system transformation, request capital funding to support the construction of a Medicaid Assisted Living Program in the case where the Eligible Applicant does not already have an award for ALP beds since there have been no subsequent ALP RFA's? Please note, the Applicant has access to an appropriate location for this construction project.	Residential health care facilities licensed under Article 28 of the PHL are Eligible Applicants under Section II., Who May Apply. Eligible Applicants must meet the other minimum eligibility criteria under Section II. of the RFA. Assisted Living and Enriched Housing Providers/Programs are not Eligible Applicants or Eligible Projects under this RFA.
131	Eligible Expenses	Section III B, Eligible Expenses: For a project considering a "build to suit" arrangement with a long-term lease (25-30 years), would the portion of rent that covers the construction of the space be considered an eligible cost? We understand from the RFP that operating lease payments are excluded, but would the portion that is directly from actual capital costs be eligible under this grant?	Not enough information is provided to allow for a response.
132	Eligible Expenses	Please define "equipment costs" as referenced on page 6, Section III, B of the RFP.	Equipment costs have a 3 year or greater useful life.
133	Eligible Expenses	I am inquiring to see if Dental build and/or equipment is eligible under the Statewide 2 grant.	The applicant must be an Eligible Applicant. RFA, Section II. Who May Apply specifies who are Eligible Applicants. An Eligible Applicant must be a legally existing organization and capable of entering into a binding Master Grant contract with DOH, be one of the types of provider organizations listed, and deemed by the Commissioner to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, or residential health care services in a community. Also see RFA, III. Project Narrative/Workplan, B. Eligible and Excluded Expenses and Disallowed Costs.
134	Eligible Expenses	Are any medical equipment(s) or supplies with a life expectancy beyond 3 years allowable expenses if we need them to promote successful start-up of the proposed project? (Example: shelving and an examination table in a new primary care facility co-located on-site at a behavioral health clinic.)	Yes, these expenses are eligible expenses if they are part of an Eligible Project.
135	Eligible Expenses	As part of the delivery of telehealth services, both the originating site and the distant site require certain internet capabilities in order for the full capacity of telehealth to be used (i.e. videoconferencing). May an applicant include as an eligible cost the costs to upgrade the internet capacity of a distant site, which is not under the control of the applicant, but where the patient will be receiving services?	If the asset remains on the Eligible Applicant's books, it is an eligible expense. If the asset will not remain on the books of the Eligible Applicant, the other site should consider applying as an Eligible Applicant. RFA Section II. Who May Apply, specifies Eligible Applicants. An Eligible Applicant must be a legally existing organization and capable of entering into a binding Master Grant contract with DOH, be one of the types of provider organizations listed, and deemed by the Commissioner to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, or residential health care services in a community. Note that eligible expenses must be related to an Eligible Project. Also see RFA, III. Project Narrative/Workplan, B. Eligible and Excluded Expenses and Disallowed Costs.
136	Eligible Expenses	Can you provide examples of startup costs that can be related to a project?	Start-up operating expenses must be directly connected to and an incremental cost of the Eligible Project for which funding is being sought under this RFA. Start-up operating expenses are for a limited brief period until program operating revenue is reasonably anticipated to support operations (case by case basis). As stated in the RFA, page 6, "...an Eligible Applicant should be able to describe project elements and their anticipated costs in sufficient detail for the reviewer to make a judgment on the reasonableness of the anticipated costs and how the Eligible Applicant estimated these costs". Such detail should be provided under RFA, Section V. Completing the Application, 5. Project Budget, a and b.

Q#	Category	Question	Answer
137	Eligible Expenses	Where can applicants find a grant-specific definition of “start-up operating expenses”?	See answer to question #136.
138	Eligible Expenses	Regarding Section B (RFA p6) “Eligible and Excluded and Disallowed Costs,” are any items specifically included or categorically excluded from the “start-up operating expenses directly connected to the eligible project” which applicants are generally allowed (per the second bullet under “Such non-capital expenditures may include:”)?	See answer to question #136.
139	Eligible Expenses	Is there a defined duration for the “start-up operating cost” or “start-up operating expense” period? (i.e., is it within the applicant’s discretion to estimate how long it will need the requested transformation funding to support key start-up-related personnel salaries, benefits, and/or contracted services)?	See answer to question #136.
140	Eligible Expenses	Per RFA p6, Section B (“Eligible and Excluded Expenses and Disallowed Costs”), is it allowable for applicants to use non-capital SHCFTP II funds to support start-up, mobile outreach activities and awareness-building advertising aimed at connecting vulnerable populations to the newly integrated services and renovated infrastructures to be enabled by the funded capital project(s)?	See answer to question #136.
141	Eligible Expenses	Which of the following M&A-related costs are allowable? a. Translation services to inform community of merger b. Retention bonuses for staff being acquired c. Marketing related costs d. Project management costs related to post-merger implementation e. Temporary staff to make outreach calls to patients to inform of merger f. External counsel g. Project management costs h. Personnel time to plan for project management	See answer to question #136. There is not enough detail provided to sufficiently respond to each example.
142	Eligible Expenses	Can a nonprofit apply for a vehicle to provide mobile healthcare services and also for the construction of a carport or garage in which to house the vehicle? If a non-capital proposal is submitted related to a project (such as the mobile healthcare project above), can it include salaries to hire staff to implement the project initially (for example, for the first year)?	Capital costs related to the planning and design of a fixed asset, as well as construction costs, are Eligible Expenses under this RFA. Non-capital projects may include salaries for start-up operating expenses. Start-up operating expenses must be directly connected to an Eligible Project for which funding is being sought under this RFA. Start-up operating expenses are for a limited brief period until program operating revenue is reasonably anticipated to support operations.
143	Eligible Expenses	Are salaries and benefits of employees who will perform construction work on the proposed project eligible?	To the extent that the salaries are a regular obligation of the applicant and would have to be paid regardless of whether or not the project occurs then the salaries (or a component thereof) would be a general operating expense and, therefore, ineligible.
144	Eligible Expenses	If a provider is aiming to join an Independent Practice Association (IPA) as part of a more comprehensive long-term sustainability plan, can the initial fee of joining the IPA (as an example, \$40,000, with documentation provided) be reimbursed through the non-capital allowances of this grant?	Start-up costs may be eligible if they are directly connected to and an incremental cost of the Eligible Project for which funding is being sought under this RFA. See answer to question #142.
145	Eligible Expenses	As a part of long term financial sustainability of the services provided, can we include the cost of staff to increase the agency’s fundraising capacity? Can we include staff such as credentialed Family Peer Advocates for the purpose of improving engagement and therefore show-rates at clinic appointments – ultimately resulting in increased Medicaid revenue?	See answer to question #142.
146	Eligible Expenses	Please confirm whether the salaries and benefits of employees who will perform design and construction work on the proposed project is an eligible expense.	See answer to question #142 and #143.
147	Eligible Expenses	Can you please define what you mean by a working capital project? For example, would asking for the equivalent of one month’s payroll to improve cash flow so that we can invest in projects that support our ability to preserve essential health care services be an eligible project? If working capital is allowed (see question one), on what line item of Attachment 3, Use of Funds tab would the requested money go?	The example provided is not an eligible expenses in and of itself, it would need to be tied to an Eligible Project.

Q#	Category	Question	Answer
148	Eligible Expenses	If the construction/renovation components of the proposed project is delayed and extends past the 5-year grant contract period, would exceptions be made to allow for continued use of award funding (and/or distribution of funding to the applicant) past the 5-year period in order to complete the project?	A no cost time extension may be considered on a case by case basis.
149	Eligible Expenses	Is an applicant allowed to request/use SHCTP II funds to improve a site that is owned by a partner organization if the capital project will advance integration of healthcare by enabling more co-location of services?	Capital improvements are eligible at sites controlled by the applicant through direct ownership or a long-term lease. If a long-term lease (more than one year) is contemplated, the terms of the lease must be evaluated on a case by case basis by DASNY bond counsel and are dependent on the useful life of the improvements to be made to the space and the terms of the applicable bonds.
150	Eligible Expenses	What is the minimum time left on a lease required in order to propose a capital project for that space under Statewide Health Care Facility Transformation II?	See answer to question #149.
151	Eligible Expenses	If funding is requested for major renovations of a site that is not a fixed asset, what are the expectations for length of lease?	See answer to question #149.
152	Eligible Expenses	Can excluded expenses that may become included due to a new program run for a period longer than 6 months?	Excluded expenses are not eligible for funding.
153	Eligible Expenses	Is grant funding available for capital projects that to at least some degree have already been initiated with or without a down payment?	See answer to question #17.
154	Eligible Expenses	Is this an appropriate mechanism by which we can transition a 31/32 license to a 28? What costs associated with that process are eligible for funding under this? Planning? Capital construction to build out space?	The applicant must meet the minimum eligibility requirements in Section II., Who May Apply, of the RFA. Project goals will be evaluated with respect to Section III. C. Evaluation Criteria. Eligible costs will be evaluated relative to Section III. B. Eligible and Excluded Expenses and Disallowed Costs. The applicant will also need to submit a Certificate of Need (CON) application for this type of project.
155	Eligible Expenses	May an applicant include as eligible costs the costs incurred by the applicant for services provided by an entity which is a health care provider that is not considered an eligible applicant for purposes of this RFA?	See answer to question #154. General ongoing operating costs applicable to day-to-day operations are not eligible for funding.
156	Eligible Expenses	May an applicant include as eligible costs the cost to acquire an entity that is a health care provider, but a provider that is not considered an eligible applicant for purposes of this RFA?	See answer to question #154.
157	Eligible Expenses	Our agency has both an Article 28 medical clinic and an Article 31 mental health clinic. We also provide comprehensive wrap-around services to the clients served in the clinics and will be providing Care Management through Children's Health Homes once they are implemented by the State of New York. These services are central to our ability to provide integrated, patient-centered health care delivery. Our questions involves capital improvements to the space that houses the essential wrap-around services including educational services, social services, recreation programming, parenting education, the Care Managers, etc.. These services are located on a different floor from the clinics but clients move back and forth between these spaces during any given visit to the agency. Would the costs of capital improvements to this space be an eligible expense?	An Eligible Applicant must submit and Eligible Project. Please also see answer to question #154.
158	Eligible Expenses	If the project involves moving a program from one location into a new building, are moving expenses considered an eligible expense?	Yes.
159	Eligible Expenses	We are a large outpatient mental health/substance use treatment program. We are considering submitting an application to cover costs associated with the purchase, installation and staff training of a new electronic medical system to replace our current one that is no longer supported. Would these be eligible expenses under this grant program?	Information technology expenses that are capital in nature are Eligible Expenses per this RFA. Cloud-based and certain software expenses, however, are not Eligible Expenses because they are considered a general operating expense. Terminals and laptops used to access a cloud based system would be Eligible Expenses as long as they have an expected useful life of three years or more. Staff training to implement an Eligible Project, such as "train the trainer" costs, is an Eligible Expense, as opposed to general staff training costs that are not Eligible Expenses.
160	Eligible Expenses	Can a proposal include more than one physical location? I.e., can we apply to implement technology upgrades across a number of Article 31 clinics?	Yes, an eligible applicant and expense may include more than one location. See answer to question #159.

Questions and Answers

Q#	Category	Question	Answer
161	Eligible Expenses	Are landscaping and painting eligible expenses under "Renovation Costs"? Is software (i.e. - electronic health records) an eligible expense.	Capitalized renovation expenses are Eligible Expenses, and include landscaping and painting. See answer to question #159.
162	Eligible Expenses	Can we lease equipment or does it need to be purchased to be paid for by the grant?	Grant funds cannot be used to pay for leased equipment. Equipment must be purchased.
163	Eligible Expenses	If we plan to refinance acquisition costs as part of a new construction loan that will support our proposed capital project in our application, is it possible to include this debt as part of the overall capital project costs for the application or do we leave it out?	Re-financing long term liabilities would not be considered an eligible capital expense. Such liabilities would be considered on a case by case basis in a non-capital project application.
164	Eligible Project	If we were awarded dollars under the SHCFTP I, are we eligible for unfunded projects or new projects in SHCFTP II?	See answer to question #75.
165	Eligible Project	We are a community-based provider and were funded in the SHCFTP I for our behavioral health and primary care integration. With this opportunity, we would like to apply for a similar project at a different behavioral health clinic. Are we able to apply for new funding for a new project under this RFA?	See answer to question #75.
166	Eligible Project	Can an Eligible applicant submit a project that addresses services for Medicare patients as well or is funding only available for Medicaid patients?	Projects will be evaluated in accordance to the criteria listed on page 7 of the RFA, III. Project Narrative/Workplan, C. Evaluation Criteria.
167	Eligible Project	Would this funding be limited to only those individuals served through the Article 16 clinic, or could this funding be used to benefit other individuals in our agency?	Funding is awarded to serve the purposes for which award is funded.
168	Eligible Project	Can a non-capital project be submitted without submitting a capital project as well?	Yes. Please see answer to question #49. However, separate applications must be submitted for non-capital projects or purposes even if they are part of the same overall transformation plan for which an application for a capital project(s) is also being submitted. If an Eligible Applicant submits multiple applications for funding under this RFA, the Eligible Applicant should assign a priority to each application where indicated in the application.
169	Eligible Project	Can the renovation and construction of new offices in a leased facility be considered a capital project under this RFA?	Yes. Real property site control can be achieved by ownership or long-term lease.
170	Eligible Project	Is a master planning/facilities assessment project for an FQHC with multiple sites eligible under the Statewide funding opportunity? In this hypothetical, the project would no include renovation/alteration or construction costs, and would only include costs relating to master planning/facilities assessment. If this type of project is eligible and competitive, would it be considered capital or non-capital?	No. Master planning/facilities assessment in and of itself without a corresponding, submitted application is not an Eligible Project.
171	Eligible Project	The RFP places a premium on strategic partnerships in the application process. Would this include a capital project in which only one partner has a capital interest in the property, but that the project would facilitate a genuine new partnership in service delivery with an identified partner?	Applicants must meet eligibility requirements in Section II, Who May Apply. The quality of the Eligible Project will be judged based on how well it contributes to enable the Eligible Applicant to achieve financial sustainability and strengthen and protect continued access to essential health care services in the community. As indicated in the RFA, creation of a financially sustainable system of care should be associated with a merger, consolidation or significant restructuring activity. A lessor/lessee relationship is unlikely to be considered a "significant restructuring activity" in this context. See also answer to question #76.

Q#	Category	Question	Answer
172	Eligible Project	We have a long-term lease on our first, newly constructed satellite site, that is set to open this summer. We have been offered the opportunity to expand and build out a second space, and purchase the entire space as a condominium property. Is the State amenable to projects such as this?	For an Eligible Project, the purchase of a site may be an eligible capital expense. RFA Section III. C. Evaluation Criteria describes factors DOH will consider in determining whether to grant an award.
173	Eligible Project	Are projects partially funded by the DSRIP CRFP program, but not yet in progress or completed, eligible for an award through this RFA?	If the project is not yet started at the time of application submission, the unfunded portion may be eligible for finding under this RFA.
174	Eligible Project	Can applicants apply for funding under this RFA to expand upon a project that was funded under the CRFP program?	Applicants that received CRFP funding may apply for SHCFP II funds for projects not funded under the CRFP RFA initiative and not currently under construction.
175	Eligible Project	If we received an award for NICIP can we apply for this grant as a new project or as expanding the NICIP project?	Applicants that received NICIP funding may apply for SHCFP II funds for projects not funded under the CRFP RFA initiative and not currently under construction.
176	Eligible Project	Are projects that are underway but not yet completed eligible for grant funding?	See answer to question #17.
177	Eligible Project	We have recently completed renovations on one of our Health Centers; is this an eligible project?	Completed renovations are not an eligible expense.
178	Eligible Project	3d iv. – What perspective are we taking to address potential risk, i.e. are you looking for whether the intervention we’re proposing alleviates risk to the patient or whether it creates a risk or impact to patient safety?	It is up to the applicant to describe how the proposed project addresses potential risk to patient safety and welfare.
179	Eligible Project	If our system is submitting an application to transform Space X and at sometime between the application due date and the contract start date Space X becomes unavailable, are we allowed to switch to available Space Y, with everything remaining as close to the same as the submission information as possible? If so, how would we need to vet Space Y? Similarly, if at the time of submission we have identified Space X as the primary location and Space Y as a potential back-up one, do you advise to submit information about both?	Yes, it may be possible for an approved project to change locations after receiving an award. However all post-award changes are subject to reassessment by the DOH related to whether it meets all eligible award criteria for which the grant was awarded. It is up to the applicant to determine whether to submit information about a back-up site.
180	Eligible Project	If the project we are applying for is for the purchase and renovation of a new building, must we have the specific building identified at the time of the application? If so, must it be under contract?	See answer to question #179.
181	Eligible Project	If the program applicant is an existing program on a smaller scale would it be eligible to apply for start-up funds for impending growth?	Incremental start-up costs may be eligible for funding as part of an Eligible Project. Start-up operating expenses must be directly connected to an Eligible Project for which funding is being sought under this RFA. Start-up operating expenses are for a limited brief period until program operating revenue is reasonably anticipated to support operations.
182	Eligible Project	Re: RFA Page 20, “The Project(s)”: For clarity and efficiency of application preparation, which numbered question-responses (if any) does the funder request/wish/allow to be identical and which numbered question-responses MUST be different (non-identical) when comparing / submitting both a capital eligible project and a highly related non-capital eligible project, both pertaining to the same healthcare transformation concept?	<p>Separate applications are required for capital and non-capital projects. The Eligible Applicant should assign a priority to each application if separate applications are submitted. The Eligible Applicant is not required to rank projects within an application. It is important for Applicants to indicate if the capital and non-capital projects are interdependent and cannot be completed unless both are funded. The Applicant should state this interdependence in Grants Gateway under Program Specific Questions, <u>3. PROJECT DESCRIPTION</u>.</p> <p>If projects are considered interdependent to creating financially sustainable system of care, they can be submitted as one capital or noncapital application. If the projects are not interdependent, they do not need to be submitted as one application. Applicants must use their best judgment when answering each question in the application.</p>

Q#	Category	Question	Answer
183	Eligible Project	Can a proposal include more than one location or must it be limited to a single site?	Yes, an Eligible Project can include more than one location. Separate applications by the same Eligible Applicant for each location is not required. If the Projects are considered interdependent to creating a financially sustainable system of care, they can be submitted as one capital or non-capital related application. If the projects are not interdependent, they do not need to be submitted as one application.
184	Evaluation Process	If an applicant submits multiple applications, will priority 2, 3 and 4 applications be given equal consideration, anticipating there will be a large volume of applications to review? Further, if a project that is identified as a lower priority by org (for example, priority 3) is scored higher than applicants priority one, will lower priority be awarded? (Under 3. Project, paragraph g., page 21).	All Eligible Application will be evaluated according to the process outlined in the RFA, V. Completing the Application, C. Review and Award Process.
185	Evaluation Process	Section V A 2: Many of the questions in the application talk about current service area and capacity. If we are proposing a new service that will fill an existing gap with a larger service area, will the application be scored on that information and the projected capacity, or only on the services existing to date?	This is a discretionary program. The goals of the SHCFTP II are to strengthen and protect the continued access to health care services in communities throughout New York State and facilitate the financial sustainability of these health care providers through mergers, consolidation and restructuring activities. The strength of an application and the likelihood that it will be evaluated positively is largely dependent on the overall approach taken by the applicant to improve long-term financial sustainability and/or protect and strengthen access to health care services in the community. See also answer to question #185.
186	Existing Contract	Do we need to reapply for our existing funds? Trying to interpret pg. 19, Section V.1. Previous Funding Applications.	No.
187	Feedback on Previous Application	In 2016, our organization applied for a grant under the Statewide Health Care Facility Transformation Program, Application - DOH01-SHCFTP-2016-00019. The grant was not selected for an award. We are considering applying for funding under RFA# 17648. It would be extremely helpful in determining whether to apply if we could see the reviewers comments. Note that we are not in any way asking for a review of the decision. We simply want to determine where our application fell short and whether it is worth the considerable effort to prepare a new application (and your effort to read it).	Feedback will not be provided to applicants regarding previously submitted applications. As also stated in the Statewide I RFA, "Based on the number of applicants, DOH shall have the sole discretion of whether or not to provide an opportunity for non-successful applicant to request a debriefing to be conducted after the announcement of awards. Comparisons with other grant applications will not be made during a debriefing." Given the large number of applications received as part of Statewide I, DOH exercised its option to not offer debriefings.
188	Feedback on Previous Application	Our agency submitted an application in response to the RFA for the SHCFTP phase I and was not successful. I will be essential to our ability to submit a successful application in phase II that we have some feedback on the strengths and weaknesses of our previous application. How can we receive such feedback or a debriefing?	See answer to question #187.
189	Feedback on Previous Application	Is it possible to receive feedback on a previous application at this point?	See answer to question #187.
190	Kings County Awards	The RFP indicates that winners of the King County Health Care Facility Transformation awards will not be eligible for Phase 2 funding, however, these awards have yet to be announced (applications were due May 5, 2017). When does DOH anticipate announcing these awards? In the absence of award notifications on Kings County, agencies may end up unnecessarily committing time and resources toward completing a Phase 2 proposal.	Award and non-award letters related to the Kings County RFA have now been sent to applicants. Eligible applicants that applied to the Kings County RFA, but were not funded, can submit an application in response to the Statewide II RFA. Applications for Statewide II funding must satisfy all applicable Statewide II RFA requirements.
191	Kings County RFA	Can NYSDOH or DASNY provide any information about whether or not a second round of Kings County Health Care Transformation Program funding will be released in 2018 or 2019?	It is not possible to speculate on the 2018-19 or future state budgets.
192	Kings County RFA	We applied for funding under the Health Care Facility Transformation Program: Kings County (RFA #1701230306). We have not received a response to our application to date, so it is unknown if we received funding or not. Does that mean we cannot apply for funding under this current grant?	See answer to question #190.

Q#	Category	Question	Answer
193	Kings County RFA	As an organization that submitted an application for funding under RFA#1701230306, can we submit a grant under this RFA if we ask for funding not asked for in previous grant? If we requested \$5,000,000 under RFA#17101230306 for debt retirement but the actual amount of debt is \$15,000,000, can we request the \$10,000,000 balance under RFA#17648?	No, a Statewide II application that supplements a project that received an award from the Kings County program is not eligible for funding under the Statewide II RFA. The statute states that a project awarded in “whole or part” under the Kings County program is not eligible.
194	Letter of Interest	Is there any advantage to completing the LOI in addition to the application?	A Letter of Interest is optional and was included as part of the RFA in order for the Department to have an estimate of the number of providers submitting applications. A Letter of Intent is not a requirement of the RFA and is not part of the evaluation criteria.
195	Letters of Support	Can we provide letters or support, for example, from elected officials? If so, should we upload in the Grantee Document folder, or somewhere else?	Letters of Support are not a requirement of the RFA and are not part of the evaluation criteria.
196	Long-Term Financial Stability	Question related to Attachment 3, Impact, Financial Viability and Incremental Impact – Auto Populated: If monies are being requested for expansion to a new site, should the previous year total and current year total be left blank, or should they reflect the larger organization’s financials? As part of that larger organization, new site incremental growth may not be accurately reflected.	Eligible Applicants should present the impact of the project on the entire entity for which certified financial statements are available. The projected years of the enterprise budget should only reflect the incremental data associated with the project(s) within the application. Eligible Applicants may submit additional supporting details and PDF uploads to the Grantee Document Folder. Please clearly label any uploaded files.
197	Long-Term Financial Stability	At the top of the “impact – financial viability” tab in Attachment 3, the instructions say that “previous and current year totals must reconcile back to the two most recent certified financial statements provided with this application.” As this is a new, “non-started” project for us, we don’t have previous totals to include. Do we keep it empty?	See answer to question #196.
198	Long-Term Financial Stability	Per Attachment 3, tab 3, “Impact - Financial Viability,” (Instructions in cells B9-B12), we want to confirm our understanding that the financial projections are expected to include only the incremental expected increase/decrease in revenues and expenses, and not the entire agency projection for those years.	See answer to question #196.
199	Long-Term Financial Stability	Please confirm that the amounts reported in Prior Year and Current Year columns on Attachment 3 should reflect amounts for the entire hospital and not just for the department for which the proposed project pertains to. (Reference: RFA Section V. Completing the Application, A. Application Format/Content, Question 5a. Project Budget, Attachment 3)	See answer to question #196.
200	Long-Term Financial Stability	Financial Template, Attachment 3 Tab 2: For the Revenue by Service section, should only the patient revenue be included for each applicable service or does other operating revenue get incorporated (i.e. grant and contract revenue, rental income, interest income, etc.)?	Yes, for the Revenue by Service section, only include patient revenue.
201	Long-Term Financial Stability	RFA page 22, Section V. 7 - In Attachment 2, Tab 2 Impact - Financial Viability forms, if a hospital system is applying on behalf of a hospital that it will soon affiliate with as an active parent, should the previous and current year data and financial feasibility projections for three years be included only for the hospital system as eligible applicant or only be included for the affiliated hospital or a combination thereof?	The Eligible Applicant should present the impact on both the subject facility as well as the enterprise facility. Eligible Applicants may submit additional supporting details and PDF uploads to the Grantee Document Folder. Please clearly label any uploaded files.
202	Long-Term Financial Stability	Per Attachment 3, tab 2, “Use of Funds,” (Row 30 and cells D15-D20), is interim interest considered an allowable, related non-capital expense, assuming an applicant will need to finance certain capital costs until reimbursement is received?	Yes, it is an eligible expense.
203	Long-Term Financial Stability	Per Attachment 3, tab 3, “Impact - Financial Viability,” (Instructions in cells B9-B12), the financial projection instructions state that “the Previous and Current Year Totals must reconcile back to the two most recent certified financial statements.” However, our nonprofit organization (an applicant) will not have our calendar-year 2017 audited financial statements complete before the application date. Simultaneously, the instructions state that the projected years are to begin “on the first day of Operations upon completion of the project”. If we were to follow both rules, we would not be providing any information regarding our 2017 numbers/results—a highly relevant period. Is this interpretation correct? Or should/can an applicant in this situation have the “Current Year” be our 2017 numbers (preliminary/set to be audited) and then explain in our narrative that our audit has not yet been completed?	Eligible Applicants should use the latest certified financial statements to complete the previous and current year columns. If these are not for 2017, and there were substantive changes in 2017, this should be described in additional supporting documents. Eligible Applicants may submit additional supporting details and PDF uploads to the Grantee Document Folder. Please clearly label any uploaded files.

Q#	Category	Question	Answer
204	Long-Term Financial Stability	Re: for the various tabs of Attachment 3 and the associated/requested "Detail of Expenses" PDF upload, is it acceptable/expected for an applicant to include salaries and benefits budget allocations for any/all individuals who will temporarily be part of the "start-up operating costs," for example during a 10-month period of launching and implementing various aspects of the transformative program being proposed?	See answer to question #140.
205	Long-Term Financial Stability	Re: the "Impact—Financial Viability" tab of Attachment 3, can an applicant request funding to (temporarily) pay salaries and benefits for both administrative and clinical personnel who are part of the "start-up operating costs"?	See answer to question #140.
206	Long-Term Financial Stability	Re: the "Impact—Financial Viability" tab of Attachment 3, can the numbered lines, including lines 18-20 that say "Other (**Specify)" be used to reference the salaries of staff that will oversee implementation of the capital and non-capital parts of the "start up" aspects of the proposed / related project(s)?	See answers to questions #140 and #131.
207	Long-Term Financial Stability	The bottom of Attachment 3, Excel tab 2 "Use of Funds" indicates that the "Project Costs – Details of Expenses" should be a separate attachment via PDF and should not exceed 5 typed pages at 12pt font." Four questions: (1) at what spot in Grants Gateway would you like applicants to upload this PDF? (Would this get uploaded in the Grantee Document Folder with a special file name?) (2) Can multi-page bids (and/or cost estimates) received on contractor letterhead be included as separate pages beyond the 5 typed pages (or must all bids/quotes from third parties be abbreviated/truncated to fit within the 5-typed-page limit)? (3) In the green cells under "Use of Funds", do you wish applicants to NOT include non-capital expenditures for any grant proposal that is capital-expenditure focused? (i.e., do not include start-up expenses directly connected to the eligible capital project, and instead include start-up or debt restructuring ONLY in a totally separate Attachment 3 submitted in a totally separate grant application via Grants Gateway)? (4) For non-capital project expenses, do you wish start-up expenses for necessary "program launch" personnel (clinical and/or administrative) be indicated in the "Other expenses" cells (e.g., row 31), or elsewhere in this tab? (The applicant's intent is that such an entry would not be intended to fund long-term day-to-day operation.)	(1) Yes, separate PDF attachments may be uploaded to the Grantee Document Folder. Please clearly label any uploaded files. (2) Yes, bids may be submitted as separate PDF attachments and uploaded to the Grantee Document Folder. Please clearly label any uploaded files. (3) Non-capital expenses must be addressed in a separate grant application. See answer to question #183. (4) Yes, indicate these costs in the "Other expenses" category and provide details.
208	Match Requirements	With respect to providing evidence of commitment of funds (Section 5 paragraph a-Project Budget, page 22), what is acceptable? Is signed letter from CEO sufficient?	A signed letter from the CEO along with audited financial statements or if internal financial statements, supporting documents. i.e. bank statement, are considered evidence of commitment of funds.
209	Match Requirements	Does the State have any preference for applicants that include cost sharing? If so, what percentage is required or suggested for a preference?	Matching funds is not an evaluation criteria in the SHCFTP II RFA. However, a match is not precluded as part of an application. In determining awards for eligible projects, the extent to which an applicant has access to alternative funding is one of a number of evaluation criteria outlined on page 7 of the RFA. Preference will be given to applicants who do not have access to alternative funding other than grants to complete the proposed project(s) in the application. Upon award, it is a condition for those applicants proposing a match, that all sources for the grant funded project are verified as available to fund the project.
210	Match requirements	FQHCs are currently facing uncertainty about HRSA funding, making it difficult to determine whether or how much we can contribute in matching funds or how much debt we might be able to carry. Will this be taken into consideration in the review process?	See answer to question #209.
211	Match Requirements	In terms of matching funds, what is expected, 100% matching?	See answer to question #209.
212	Match Requirements	Is there any preference in application evaluation for requests that provide matching funds?	See answer to question #209.

Q#	Category	Question	Answer
213	Match requirements	Are matching funds required to be eligible for funding from Transformation Program II funding? 2. We are in the process of pursuing additional funding for the Eligible Project through various foundations and elsewhere. Thus, we don't have commitments yet from those other funding sources. May we list sources of alternative funds even though we have not yet secured commitments from those sources?	See answer to question #209.
214	MWBE & SDVOB Requirements	My company is an Empire State Certified Minority and Woman Owned Business Enterprise that distributes Medical Equipment and Supplies, which includes Vital Signs Monitors, Operating Room Tables, Beds, Mattress, Stretchers, Scales, Healthcare Screening and Testing Equipment, Sterilizers, Powered and Non-Powered Surgical Instrumentation, Emergency Evacuation Devices, Custom Kits, Lab Testing Equipment, Patient Safety, Fall Prevention, and Other Alzheimer related Medical Products. Will this grant include such products? Will you need to a State Contract for Outdoor Furniture and Trash Receptacles under a New York State Contract? Can a MWBE be a subcontractor for a prime contractor to help reach grant diversity goals with medical products, supplies, equipment and industrial equipment and can you provide my company information to the applicants?	Eligible expenses may include such products. Yes, a MWBE can be a subcontractor for a prime contractor. Below is the contact information for this company: Connetquot West, Inc. Health Care Products https://www.cwiquality.com/
215	MWBE & SDVOB Requirements	Are applicants required to include completed MWBE and SDVOB forms within their applications, or can those forms be submitted post-award to ensure sufficient time to conduct a fair bidding process that includes substantial good-faith efforts to recruit MWBE and SDVOB vendors?	The applicant should commit to MWBE and SDVOB participation goals and complete all relevant forms. It is encouraged that the applicant identify specific firms, if possible, in their utilization plan at the time of application. However, the identification of specific firms is not required to apply to this RFA.
216	MWBE & SDVOB Requirements	Please advise if Attachment 7 - SDVOB 100 Utilization Plan and/or Attachment 8 SDVOB 200 Wavier Form is required for a For-Profit entity. Is the Applicant required to identify NYS Certified Service-Disabled Veteran-Owned Business (SDVOB) before the construction out to bid out?	See answer to question #215.
217	MWBE & SDVOB Requirements	MWBE and SDVOB: For non-capital requests, do these apply as there will be no subcontractors?	Yes, MWBE and SDVOB requirements do apply for non-capital expenses that are not applicant salary and benefits or debt retirement.
218	MWBE & SDVOB Requirements	Will the prime contractor be able to divide a project so that it is manageable for the MWBE Sub-contractor to bid on the project?	Applicants must work with their contractors to ensure that MWBE goals are met for the project.
219	Number of Applications	Does an applicant that is applying for both capital construction \$ for a new health care clinic, and start-up funding need to submit two applications or can both requests be included in one application?	With respect to multiple applications: a. Separate applications are required for capital and non-capital projects. b. Applicants submitting multiple applications must assign a priority to each application. c. If applications are interdependent and the overall project cannot be completed unless all are funded, the Applicant should describe this interdependence (in Grants Gateway under Program Specific Questions, 3. Project Description), in each related application. d. Within a given application, multiple projects and multiple locations may be included if they are considered interdependent to creating a financially sustainable system of care. e. There is no limit on the number of applications an Eligible Applicant can submit. It is up to the applicant to determine whether to submit a project as its own application or as part of a broader application. Projects will be evaluated according to the criteria set forth in RFA Part III, Section C. Evaluation Criteria.
220	Number of Applications	Should unrelated capital projects be submitted in one application?	See answer to question #219.
221	Number of Applications	Can we submit two applications?	See answer to question #219.
222	Number of Applications	If a hospital wants to request capital funds to set up two Article 28 outpatient practices at separate locations but each having the same array of services, can this be submitted as one Eligible Project in one application or does the hospital need to submit two separate applications?	See answer to question #219.

Q#	Category	Question	Answer
223	Number of Applications	My facility would like to submit two projects to be considered for the grant. 1. Construction of a new Medical Office Building, 2. Construction of an inpatient children's mental health unit. Do we submit two separate applications?	See answer to question #219.
224	Number of Applications	Is there a limit to the number of grant applications one organization may submit? (So, for example, we understand that we may at least submit two applications: one that is a capital project and a corresponding one that is non-capital but that relates to the same healthcare transformation concept as the capital project. Are applicants required to submit a <i>third</i> or <i>fourth</i> application under any specific circumstances? If so, what would such circumstances be?)	See answer to question #219.
225	Number of Applications	Is it preferable to submit separate capital asks for the two sites in our network, or to combine the all-capital ask into a single proposal that would encompass projects at two sites in two NYC boros?	See answer to question #219.
226	Number of Applications	If an organization is planning two closely related projects at different sites, may they be included in the same application?	See answer to question #219.
227	Number of Applications	Would we be able to submit a single application (i.e. as a single project) asking for funds for both debt relief and working capital? The ask is unified in the sense that both activities would free up cash to be invested in projects to support our ability to preserve essential health care services.	See answer to question #219.
228	Number of Applications	Can we submit one application for capital expenditures at two different locations (both part of one organization) or must we submit two separate capital applications, one for each location? The funds would be used to help each clinic run more smoothly and efficiently by, for example, replacing HVAC systems that don't work properly.	See answer to question #219.
229	Number of Applications	Our organization would like to expand access to services to residents within a geographic area that spans two adjacent boroughs in New York City. Our organization currently operates health centers in Borough A and Borough B. We plan to lease and renovate a space for a new center in a different neighborhood of Borough A. During the same time period, we also plan to lease and renovate a space for a new center in Borough B (the existing Borough B center will likely be phased out once the new centers are fully operational). Our plan and timeline would ensure no disruption of services to residents of these geographic areas, and the final result would increase access to services to more people from both Boroughs. Because the projects are closely related, may a SINGLE capital proposal submission include renovation for more than one physical location, provided that we are able to describe the geographic need and other relevant information regarding access for both locations in the same submission?	See answer to question #219.
230	Number of Applications	Our agency provides primary health care and mental health services in three different counties. Can we combine projects in different counties into one project or should they be separated?	See answer to question #219.
231	Number of Applications	Section III; Items A and B: If the project can be broken down into specific parts, should a separate proposal be submitted for each part or should it be submitted under one proposal identifying the various parts?	See answer to question #219.
232	Number of Applications	If submitting multiple related applications, ranked by priority, per RFA page 21, question 3g, should all of the applications indicate different project titles (on Attachment 2), or—if they are all part of the same transformation project—should/can each application have the same title (using “Part 1”, “Part 2”, “Part 3” at the title-end)?	See answer to question #219.
233	Number of Applications	Can an applicant submit 2 applications from different counties, for example Kings County and Westchester County?	Yes.
234	Number of Applications	If there are 2 related projects on the same campus, can both projects be submitted on the same application? I assume there needs to be a separate set of financials for each project?	One budget is required for each application. Per the RFA page 6, Eligible Applicants must include a robust description of the Eligible Project and justification for all expenditures in the Project Budget as well as a discussion of how the expenditures relate to the Eligible Project. If the projects are interdependent, submit as one applications with a combined financial. If the projects are independent, submit as two applications, each with its own financial. See also answer to question #219.

Q#	Category	Question	Answer
235	Number of Applications	Re: RFA, Page 20, Organizational Capacity. Question 3b indicates, “For each Eligible Project, describe how it will contribute...”. For the purposes of this grant application, how does the funder define a single unified “project” (versus what constitutes multiple, separate eligible capital projects)? Can you clarify whether more than one capital undertaking/project is allowed to be included within a single (unified themed) application (understanding that related, corresponding non-capital projects will be submitted under a separate application)?	Multiple capital projects that relate to the same transformation plan for an applicant may be submitted in one application.
236	Number of Applications	Page 20 of 27: 3. The Project(s): Describe the Eligible Project(s). This language indicates that an applicant can propose more than one initiative within the same application. Yet there is no explanation how multiple projects are to be framed. That is, (1) do the multiple projects have to be integrated and essential to each other, or can each project be described relevant to the section C. Evaluation Criteria, on page 7 of the RFA?	Each subproject within a single application should be described relative to the RFA Section III. C. Evaluation Criteria. The Eligible Applicant is not required to rank projects within an application. The Eligible Applicant should assign a priority to each application, however, if separate applications are submitted.
237	Number of Applications	Page 14 of the 1/31/2018 Applicant Webinar PowerPoint - Since a separate application is required for a non-capital project even if it is a part of the same overall transformation plan for which an application for a capital project(s) is being submitted; and we are also required to prioritize each of the applications; will the two applications be considered together as one overall project plan with equal opportunity for funding both applications? Or is it likely that only one of the applications will be funded?	Refer to RFA Section V. C. Review and Award Process. The intent of the SHCFTP II RFA is to fund as many eligible applications as possible. The strength of an application and the likelihood that it will be evaluated positively is largely dependent on the overall approach taken by the applicant to improve their long-term financial sustainability and protect and strengthen continued access to essential health care services in the community. It is not possible to provide specific guidance regarding which applications will ultimately be funded. Separate applications are required for capital and non-capital projects. The Eligible Applicant should assign a priority to each application if separate applications are submitted. The Eligible Applicant is not required to rank projects within an application. It is important for Applicants to indicate if the capital and non-capital projects are interdependent and cannot be completed unless both are funded. The Applicant should state this interdependence in Grants Gateway under Program Specific Questions, 3. PROJECT DESCRIPTION.
238	Number of Applications	Re: RFA Page 20, “The Project(s)”: Pertaining to the instruction “Separate applications must be submitted for non-capital projects or purposes even if they are part of the same overall purpose for which an application for a capital project(s) is also being submitted,” to what extent is it expected/appropriate that the vast majority of all such separate application responses will be identical across the pair of related applications? (For example, it seems that many or all of the responses in the “Identified Community Need” would be the same for both the capital and non-capital aspects of the proposed transformation.)	See answer to question #237. Applicants should use their best judgment in answering each question in the application.
239	Number of Applications	If one organization controls (is the parent of) multiple organizations, can each subordinate (child) organization submit a separate application, or is this rolled up to the parent organization? Would having a parent organization require each submission to prioritize their proposals if they individually are only submitting one?	Either a subordinate organization or a parent organization may submit an application for an Eligible Project. Subordinate organizations may apply individually if they meet the eligibility criteria in Section II. Who May Apply. They must also have distinct financial statements and a unique Vendor ID. A subordinate entity would only need to rank its own applications, not those of related entities. A parent organization co-operator may apply on behalf of its subordinate entities. The parent would need to rank each application it submits.

Q#	Category	Question	Answer
240	Number of Applications	Re: RFA, Page 20, Organizational Capacity. Prompt 3b indicates, “For each Eligible Project, describe how it will contribute...” Is an applicant allowed, within a single Eligible Project application (all themed tightly about healthcare access), to request funding to a perform a variety of needed capital improvements at more than one site? (For example, if an applicant is proposing to increase access to essential health care services by: (1) renovating a space within the applicant’s behavioral health clinic to enable co-located primary care services; (2) modify a separate space in a different building/town to enable telemedicine appointments; and (3) overhaul a basement area at a third facility (for instance at a partner’s site), can all of these be included within a single, unified Eligible Project if we can describe how all such modifications TOGETHER make our health system and access to it more sustainable? (Or MUST these each be broken out as separate eligible capital projects and have separate capital applications?) If one or more of the sites proposed for healthcare integration is owned or leased (long-term) by a partnering organization, is the response to the question immediately above the same?	Multiple capital projects that relate to the same transformation plan for an applicant may be submitted in one application. See answer to question #149.
241	Number of Awards	How many awards will there be?	It is not possible to estimate the number of awards in advance.
242	Organization-al Capacity	Re: RFA, Page 20, Organizational Capacity, 2d. If a client/patient is dual Medicare/Medicaid, would you like applicants to: (a) add an additional hybrid category to the set of four categories originally provided? Or (b) count that person in both existing categories (meaning the percent of all payers will exceed 100%)? Or (c) would you prefer applicants to pick one category keep the total-payer-max tally at 100%? If you’d prefer applicants to choose only one existing category, what criterion/criteria should applicants use to choose Medicaid or Medicare for someone who is dually ensured?	Applicants should classify patients by primary payer such that the total-payer-max tally should equal 100%. It is up to the Applicant to determine if the information presented satisfies the requirements of this RFA and that the data used are current.
243	Organization-al Capacity	Re: RFA, Page 20, Organizational Capacity, 2d. Does the funder wish applicants to include Managed Medicaid within the “Medicaid” category of the payer-mix... or would you like applicants to set up an additional category, beyond the four categories indicated in the question?	Applicants should separate Medicaid Fee-for-Service from Medicaid Managed Care by adding a category. See answer to question #242.
244	Organization-al Capacity	For question 2a (p20 of the RFA), “Provide the exact corporate name, board composition, ownership and affiliations, and number of employees....” What type of information or list would you like applicants to provide in response to ‘ownership’ (e.g., if an applicant is a nonprofit whose board members are all volunteers, how should they respond to the ‘ownership’ aspect of this question)?	Applicants should describe their proprietary or non-profit status and governing body including board member composition (number, term length) if applicable.
245	Organization-al Capacity	Question 2f in the Organizational Capacity section states: “Describe the geographic region served by the applicant. The geographic region served is defined as the service area from which a provider draws at least 75% of patients during the most recent 12-month cost reporting period.” We could use some clarification on which calendar year of data to provide, per the italics in the text above. Do you mean the 2016 Medicaid cost report year (which we are submitting in March 2018). Or do you mean the 2015 cost reporting year, which was the last one we submitted? Or should this be for the calendar year of our last audited financial statement, which would be 2016? Or would you like an unaudited cost report from 2017? Please clarify.	Data should be submitted for the cost reporting period ending 12/31/17.
246	Other Funding Opportunities	Will applicants who have received funding from Capital Restructuring Financing Program (CRFP) be treated the same as applicants who have not received CRFP or previous state Transformation grant funding, or will they be penalized?	Yes, CRFP awardees will be treated the same as applicants who have not received previous CRFP funding. In certain tie-breaker situations, priority consideration may be given to applications for projects submitted but not funded in response to the 2016 Statewide I RFA issued by the Department on July 20, 2016; provided, however, that any such application was resubmitted in response to the Statewide II RFA and satisfies all Statewide II RFA requirements.
247	Other Funding Opportunities	Since the RFA appears to only be directed to certified or licensed "clinics" or doctors, I'm wondering if you may have information in regards other potential RFA's for CBO's that provide services in homes?	No information on other potential RFA(s) for CBOs is available through this RFA.
248	Partial Award	If the funding availability for a grant program is reduced as noted on page 12 of the RFA, will the awardee be able to renegotiate the scope of work for the project?	RFA page 12 indicates that continued funding is contingent upon availability of funding and state budget appropriations and that DOH and DASNY reserve the right to revise award amounts as necessary due to changes in the availability of funding. In the event of award amount revisions, DOH would work with the awardee on a case-by-case basis.

Questions and Answers

Q#	Category	Question	Answer
249	Partial Award	If the application applies for a specific dollar amount, but the applicant may be willing to accept an award at a lesser amount, while still able to meet all of the stated goals and objectives of the project, would there be an opportunity to discuss this (accepting less money) with the Department, prior to finalizing all of the grant awards?	Applicants are advised to put forward their best efforts in thoroughly completing and fulfilling all requirements of the RFA. See RFA Section V. C. Review and Award Process.
250	Prevailing Wage	Does the SHCFTP II grant have a prevailing wage requirement for renovation and construction?	Payment of prevailing wage is not a requirement for this RFA. Applicants may be subject to other laws, regulations or policies that could impose a prevailing wage requirement.
251	Prevailing Wage	Do construction projects require prevailing wage?	See answer to question #250.
252	Prevailing Wage	We plan on submitting a couple of RFA's for consideration. In soliciting contractors to bid on capital renovation projects we are being asked if prevailing wages will be required to be paid on these awards?	See answer to question #250.
253	Previous Submitted Applications	Are new sites/facilities proposed for SHCFTP funding required to be open and/or serving patients within the five year contract timeline?	Yes.
254	Previously Submitted Projects	On the application, question 1d in the program specific questions, how does DOH define "substantially the same" in regards to a prior application?	To be given priority consideration, Projects submitted for funding under the Statewide Health Care Facility Transformation Program II (SHCFTP II) RFA should substantially be the same as one previously submitted under the Statewide Health Care Facility Transformation Program I (SHCFTP I) RFA (#1607010255) issued by the Department on July 20, 2016. Whether a project is substantially the same will be determined as part of the review process based on a comparison of a previously submitted application for a project to the current submission. However, if the Applicant identifies that changes are needed to the previous submission in order to strengthen the viability of the Project and the overall success of the application, they should do so. The strength of an application and the likelihood that it will be evaluated positively is largely dependent on the overall approach taken by the applicant to improve their long-term financial sustainability and protect and strengthen continued access to health care services in the community. Whereas the Project may be substantially the same under this RFA and the previous Statewide I RFA, the Applicant must complete their application in accordance with the purpose and requirements of this RFA.
255	Previously Submitted Projects	Our organization submitted an application under SHCFTP I that was not funded. If we were to resubmit this project under Phase II, adjusting the budget to account for inflation in construction costs, would this application still be considered "substantially the same" as described in Section V. A. 1. on page 19 of the RFA?	See answer to question #254.
256	Previously Submitted Projects	Our organization is interested in resubmitting a project we submitted to last year's Statewide Health Care Facility Transformation program. How similar must the application be for the project to be considered "substantially the same," as described on page 19 of the RFP? If the overall purpose of the project has not changed, are updates and revisions to our budget, projections, work plan, or other components of the response allowed?	See answer to question #254.
257	Previously Submitted Projects	Would an application submitted for SHCFTP Phase I be considered "substantially the same" as an application submitted for SHCFTP Phase II if the capital project itself was the same (for example, both applications propose identical expansion of clinical space through facility renovation/additions) but the Phase II application proposes a different use for the space than the Phase I application (for example, different allocation of exam rooms by service type)?	See answer to question #254.

Q#	Category	Question	Answer
258	Previously Submitted Projects	If an applicant originally submitted an application in the first round (SHCFTP Phase I) that included two eligible capital projects in one application, and plans to re-submit these projects, but as two separate applications that we will rank/prioritize, are there any specific instructions that applicant should follow in terms of referencing the prior application for what will now become two applications (but same projects) in Phase II?	See answer to question #254.
259	Previously Submitted Projects	If we previously submitted two interdependent capital projects in one application in response to SHCFTP Phase I, and have decided to submit only one of those components again for Phase II, but that component is unchanged, would it still be considered 'substantially the same' for the purposes of answering 'yes' to Question 1d, despite removing the second component of the Project from the application? If we plan to re-submit the same two components from SHCFTP Phase I, but as separate applications this round, would each of the projects be considered 'substantially the same' as the Phase I application for the purposes of answering 'yes' to Question 1d?	See answer to question #254.
260	Previously Submitted Projects	Are applicants under Statewide II permitted to request funds for the remaining, non-incurred costs of a project submitted under Statewide I that were not funded under the RFA, but nonetheless, undertaken by the applicant?	No. See answer to question #17.
261	Priority Consideration	RFA page 3, Section I - This section states that projects not funded under SHCFTP Phase 1 will have priority. Is that priority only in the event of a tie in final review scoring as indicated on RFA page 26, Section V.C.#3?	The intent of the SHCFTP II RFA is to fund as many eligible applications as possible. The strength of an application and the likelihood that it will be evaluated positively is largely dependent on the overall approach taken by the applicant to improve their long-term financial sustainability and protect and strengthen continued access to essential health care services in the community. In event that funds are not sufficient to support all applications in the lowest tier for which funding is available, the RFA outlines how the DOH will select applications from within that tier (Section V. Completing the Application, C. Review and Award Process). If applications within the tier are still largely determined to be equal based on this criteria, priority consideration will be given to projects that were not funded in whole or part in response to the 2016 RFA (#1607010255) issued by the Department on July 20, 2016; provided, however, that any such application was re-submitted in response to the SHCFTP II RFA and satisfies all SHCFTP II RFA requirements.
262	Priority Consideration	Regarding prioritization, should we rank projects that are included in a single application, or is prioritization applicable only to separate, multiple applications?	Applicants must assign a priority rank if submitting multiple <u>applications</u> . Applicants do not need to assign a priority rank to multiple projects within an application.
263	Priority Consideration	Given that the capability of an applicant to access debt or institutional funds will be an award consideration, is it acceptable in the application to show an alternate funding plan that might be pursued if a grant award in the full amount requested is not received? In other words, rather than proposing non-SHCFTP 2 funding, would an applicant receive the same award consideration if it showed the capability to secure non-SHCFTP 2 funds?	It is up to the applicant to determine how to best address the ability to access alternative funding sources.
264	Priority Consideration	The RFA notes that priority may be given to certain community- and facility-based post-acute care and long-term care support services. The RFA is unclear under what circumstances such support services may be given priority. Will the Department please define those circumstances. In addition, would the Department be able to provide an example of a facility-based long-term care support service? Does this mean a nursing home or an element of a nursing home? Would it include an ALP?	In event that funds are not sufficient to support all applications in the highest tier for which funding is available, the RFA outlines how the DOH will select applications from within that tier (Section V. Completing the Application, C. Review and Award Process). The tie breaker criteria are outlined under Grant Award, Stage 2.2. Among other criteria, priority may be given to projects involving community- and facility-based post-acute care and long-term care support services that: reduce unnecessary emergency department visits or inpatient readmissions through the innovative use of technology or workforce utilization; or establish collaborations across health care provider types; or provide services to patients/residents in a more home-like setting; or result in long-term financial sustainability of an essential community provider. Article 28 residential health care facilities are Eligible Applicants. ALPs are not Eligible Applicants or Eligible Projects.

Q#	Category	Question	Answer
265	Reporting Requirements	Other than the reporting requirements outlined on p. 13, Are there any restrictions and/or requirements attached to the funding awarded under this program?	Traditionally, reporting requirements pertain to progress along a project work plan. The contract may also require performance measures and milestones related to the applicant's transformation plan and what it wants to accomplish with these funds, such as annual audited financial statements, and other statistical reports showing targeted increase or decrease in particular areas of service, etc.
266	Resources	If I had a Partner that wanted to hire someone to assist in writing the grant is there a list of resources I can point them too?	No.
267	Review Grant Applications	Is there any further information on the possibility of receiving feedback on the strengths and weaknesses of our previous application for this funding?	See answer to question #187.
268	Review Grant Applications	Will the DOH disclose the names of the organizations that submitted a Letter of Intent to apply to Round II of the SHCFTP?	No, as standard operating procedure for state procurements, the DOH does not publicly post such documents.
269	Sources of Funding	If we have multiple sources of funding for a project does this improve our ranking?	Matching funds is not an evaluation criteria in the SHCFTP II RFA. However, a match is not precluded as part of an application. In determining awards for eligible projects, the extent to which an applicant has access to alternative funding is one of a number of evaluation criteria outlined on page 7 of the RFA. Preference will be given to applicants who do not have access to alternative funding other than grants to complete the proposed project(s) in the application. Upon award, although match funding is not required, it is a condition precedent to executing and approving the grant contract, that all sources for the grant funded project are verified as available to fund the project.
270	Statewide I	RFA page 19, Section V A. #1 - Will an applicant in SHCFTP Phase 2 who received funding for a project under SHCFTP Phase 1 have less priority in the review process if they are submitting for a different project submitted under SHCFTP Phase 2?	No.
271	Statewide I Applications	Can previous applications from Statewide Health Care Facility Transformation Program 1 be requested through the FOIL process?	As standard operating procedure for state procurements, the DOH does not publicly post grant applications or evaluation documents. These documents may be available under the FOIL process. You can submit a request to the Records Access Office at FOIL@health.ny.gov.
272	Statewide I Applications	If we already submitted an application to Round 1 and it was rejected can we get feedback on our proposal.	See answer to question #187.
273	Statewide I Applications	I understand that you are unable to provide a debriefing on previous applications, but can you at least tell us if our previous application was judged: Good, Acceptable, Poor, or Nonresponsive?	See answer to question #187.
274	Statewide I Applications	Will the Department develop any mechanism to inform providers that submitted a complete application under Statewide I of the merits of their application under Statewide I?	See answer to question #187.
275	Statewide I Awardees	How many awards were provided during Phase 1? Is there a link to a comprehensive list of grantees online or can NYSDOH provide this?	92 awards were made for SHCFTP I. Please see list of grantees at the end of this Question and Answers document.
276	Statewide I Awardees	Can you tell us if there is a link to Phase 1 grantees that is public? Or is NYDOH might provide a list?	See answer to question #275.
277	Statewide I versus Statewide II	Do all of the answers provided to questions submitted for SHCFTP I (Phase One) still hold true, or have there been any changes to what was represented in that document? (except of course dates and other time-specific information)	This is a separate RFA, and as such, you should only refer to the materials published in relation to SCHFTP II. Eligible Applicants must submit a qualifying grant application in response to the SHCFTP II Phase 2 RFA and satisfy all applicable SHCFTP II RFA requirements.

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Q#	Category	Question	Answer
278	Statewide I versus Statewide II	In last cycle's Q&A, there is much discussion of "Plans", e.g., transformation plans, sustainability plans. Is a long-term vision an important component of the review process in this cycle?	The strength of an application and the likelihood that it will be evaluated positively is largely dependent on the overall approach taken by the applicant to improve their long-term financial sustainability and/or protect and strengthen access to health care services in the community.
279	Statewide I versus Statewide II	For SHCFTP I, the DOH released an addendum to the RFA requiring that applicants upload proof of eligibility (operating certificate or medical license) to the Grantee Document Folder in Grants Gateway. Will this also be required for the Phase II applications?	Addendum #2 to the RFA was posted on 2/21/18 to require applicants to upload proof of minimum eligibility requirements: a copy of a New York State Operating Certificate for an Article 28, 31, 32 or 36 provider organization, or an uploaded copy of a New York State Medical License for a primary care provider. Proof of minimum eligibility requirements should be uploaded to the "Grantee Document Folder" in the Forms Menu of your online application in Grants Gateway.
280	Subcontracts	Is the firm hired to do construction considered a sub-contractor?	Yes, a firm hired by the awardee (prime contractor) is a sub contractor under this grant.
281	Subcontracts	Regarding subcontractors: We anticipate a bidding process for our capital project, so at the time of the application submission we will not know specific subcontracting entities. Will we lose points if we include the names of subcontractors we've worked with in the past and that we anticipate will participate in the bidding process? Please advise how we should address this issue.	If there are impediments to specifically identifying by name those subcontractors which will be involved in project execution, the applicant should note "To Be Determined" and, to the best of its ability, describe the type of work to be performed and the type of subcontractor (for example, an affiliate, a private business or an organization licensed or certified by another state agency).
282	Subcontracts	The RFA requires the disclosure of subcontractors. In most cases, subcontractors such as construction companies will not be known until after a bidding process, subsequent to the grant award. Is it acceptable to list the expected types of subcontractors, if company names are not known at this time?	See answer to question #281.
283	Technical - Application Access	Is a PDF available of the grant application or at least a list of questions? I don't see one available on the funding announcement page at https://www.health.ny.gov/funding/rfa/17648/index.htm	<p>The announcement and PDF of the RFA document are located in the NYS Grants Gateway at: https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx?NavItem1=2</p> <p>In order to access attachments and apply for the grant opportunity, a user must first be registered and logged into the Grants Gateway as a Grantee, Grantee Contract Signatory, or Grantee System Administrator. Once logged in, the user should click on the "View Available Opportunities" button available on their home screen and search for the Grant Opportunity by name. On the Opportunity Funding Profile page, click on "Apply for Grant Opportunity" to begin the application. If you are having difficulty, we recommend consulting the Grantee Quick Start Guide for applications: http://grantsreform.ny.gov/sites/default/files/grantee_quick_start_guide.pdf or contact:</p> <p>Grants Gateway Team Email: grantsgateway@its.ny.gov Phone: 518-474-5595 Hours: Monday thru Friday 8am to 4:30pm (Application Completion, Policy, and Registration questions)</p> <p>Attachments 1 through 5 (including Attachment 1: Letter of Interest Template) are located in the Pre-Submission Uploads section of the Grant Opportunity in the Grants Gateway. Pre-Submission Uploads can be accessed by navigating through the "Forms Menu" of your online application.</p>
284	Technical - Application Access	Are we supposed to be able to access the online application or pre-submission materials at this time. I do not see the application on the site.	See answer to question #283.

Q#	Category	Question	Answer
285	Technical - Application Access	I am having issues with viewing the grant opportunity. I am trying to view/print the application. I am in the Gateway as all roles. When I click on the Grant Opportunity I get a Grant Opportunity Profile. The only option available is a blue button "View Grant Opportunity" which only brings up a PDF with key dates and instructions etc.	See answer to question #283.
286	Technical - Application Access	Is this grant opportunity currently open for the Grantee to initiate an application? When I sign on to the grant portal, there does not appear to be a "Apply for Grant" button available to click on. Instead there is only a "Learn more about the grant opportunity" button?	See answer to question #283.
287	Technical - Application Access	We are wondering when you plan to make the grant application for the above-referenced program "live" on Grants Gateway. Meaning you could start inputting information.	See answer to question #283.
288	Technical - Application Access	I am trying to access the grant application forms on the NYS GG and am only able to download the Grant Opportunity, not access application. We want to begin asap. I have tried accessing both as a Grantee as well as Grantee System Administrator.	See answer to question #283.
289	Technical - Application Access	Please provide a more concrete detail on how to go about securing this grant and how it can efficiently earmarked to serve all facets of health care including nutrition globally.	See answer to question #283.
290	Technical - Application Access	I am not getting the "APPLY FOR GRANT OPPORTUNITY" button. I believe I am a Grantee within the system.	See answer to question #283.
291	Technical - Attachments	I am requesting a copy of the letter of interest template. It is not on the website as referenced (see Attachment 1: Letter of Interest Template) (https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx?Navitem1=2)	See answer to question #283.
292	Technical - Attachments	I have located on the grants Gateway website but I can't seem to be able to open the portal for Pre-Submissions to download the letter of intent.	See answer to question #283.
293	Technical - Attachments	I am not seeing where to select this grant to send in my letter of intent. Can you please advise as to where this is on the website?	See answer to question #283.
294	Technical - Attachments	I have logged onto the Grants Gateway as a Grantee and I cannot access the attachments that are in the RFP. Can you help me navigate the website to download the attachments?	See answer to question #283.
295	Technical - Attachments	Would you please advise me on how to access the attachments for RFA #17648- DOH-1-SHCFT2-2018: Statewide Health Care Facility Transformation Program II? I checked Grants Gateway under the grant and although the application is there, there seem to be no attachments available.	See answer to question #283.
296	Technical - Attachments	Can you please forward the attachments mentioned in the practice transformation grant. For example, it mentions a letter of interest template and other attachments.	See answer to question #283.
297	Technical - Attachments	How do we access the attachments for the application?	See answer to question #283.
298	Technical - Attachments	Which Pre-submission uploads are necessary? Minority and Women Owned I understand can be completed after awarded. What placeholder should be uploaded, in the meantime? What action must be taken on Attachment 6: Statute? Attachment 7: SDVOB Utilization Plan? Attachment 8: SDVOB Waiver Form? The instructions say Attachments 2-6 are required but Attachment 6 is not starred. What is the significance of the star? There does not look like any action can be taken on Attachment 6? It looks like information only.	The red star indicates a required upload. Attachment 6 is the Statewide Health Care Facility Transformation Program II Statute (Section 2825-3 of the Public Health Law) and is for information purposes only. The applicant should commit to MWBE and SDVOB participation goals and complete all relevant forms. It is encouraged that the applicant identify specific firms, if possible, in their utilization plan at the time of application. However, the identification of specific firms is not required to apply to this RFA.

Q#	Category	Question	Answer
299	Technical - Attachments	In the Grants Gateway attachment upload section, the narrative specifies that applicants are only required to upload attachments 2-6. However, when I uploaded the Letter of Intent, attachment 1, the page error display specified that attachments 7 & 8 were required. My first question is "Is this an error?" My second question is "What are your recommendations for completing these forms, if they are indeed required, prior to a contract being awarded or bids distributed?"	The error message you see is a reminder that other documents will need to be uploaded in the Pre-Submission Uploads section before your application can be submitted. When all documents marked as required are successfully uploaded, the error should go away. Clicking the "Check Global Errors" button in your blue toolbar will help you locate and fix errors. See answer to questions #96 & #97 regarding completion of SDVOB attachment requirements.
300	Technical - Budget	Please provide a list of expense items that would be reported for each expense category for the Capital Summary. (Reference: RFA Section V. Completing the Application, A. Application Format/Content, Question 5a. Project Budget, Attachment 3)	Please refer to RFA page 6 Section III. B. Eligible and Excluded Expenses and Disallowed Costs. Applicants should use their best judgment when allocating costs across project budget lines. Applicants should be able to describe project elements and their anticipated costs in sufficient detail for the reviewer to make a judgment on the reasonableness of the anticipated costs and how the applicant estimated these costs.
301	Technical - Budget	In Grants Gateway, the Capital Budget section requests entries for: Scoping and Pre-Development, Design, Acquisition, Construction, Working Capital Reserves, and Other. Question: if the bids received by applicants from sub-contractors bundle these costs together across some or all of these categories (despite requests for granularization), how would you prefer applicants to fill in each of text boxes in the respective Expenditure areas (e.g., Scoping and Pre-Development item #, quantity, unit price, total cost. Design item #, quantity, unit price, total cost. Etc.) Would you prefer applicants to zero these numbers out in some categories, or divide the costs across the categories in some way, even if such allocations may include subjective judgments due to the bundling?	See answer to question #300.
302	Technical - Budget	Grants Gateway - Capital Budget: We will be applying for non-capital monies under this RFA. Are we correct in assuming that we do not need to complete the 8 forms under Capital Budget in Grants Gateway under this section?	No, the Capital Budget forms must be completed. See answer to question #300.
303	Technical - Budget	Are three bids per line item required?	No. See answer to question #300.
304	Technical - Budget	In Grants Gateway, the budget section contains the following sections: scoping and predevelopment, design, acquisition, construction, administration, working capital reserves, and other. We're doing a debt restructuring project, so is "other" the only appropriate category to use? The rest don't seem relevant for our budgetary concept.	For debt retirement projects, allocate budget costs to the Other category.
305	Technical - Budget	What is the full title of "Attachment A" referenced several times in the Capital Expenditures section of Grants Gateway (and how many pages is that attachment)? Is "Attachment A," perhaps the same as "Attachment A-1" that appears on Grants Gateway with the title "Program Specific Terms and Conditions"?	The reference to "Attachment A" in the Capital Budget section is language that is hardcoded into the Grants Gateway system. There is no Attachment A; applicants should disregard this reference. Attachment A-1: Program Specific Terms and Conditions is part of the New York State Master Grant Contract.
306	Technical - Financial Statements	Re: RFA Page 22, "Question 6: Eligible Applicant Financial Stability". Can you clarify the best approach if the applicants' file sizes of combined audited financials exceed the 10MB limit indicated? In that case, can we include only the past two years' statements if each statement includes data from both present and prior year? Or, alternatively, can applicants use the Grantee Document Folder to separately upload each of the three audited financial statements? (If so, should we use the "Add Note" feature of Grants Gateway when answering question 6.)	If a combined PDF file of all three years' financial statements is too large to be uploaded, applicants may upload multiple additional files into the "Grantee Document Folder" in the Forms Menu of the online application. Please label any uploaded files clearly.
307	Technical - Financial Statements	If my audited financials for 3 years are posted in the Document Vault, will I still need to submit them?	Yes.
308	Technical - Financial Statements	Regarding the requirement to upload pdf with the 3 year financials-our IT could only reduce it to 20 MB and the grant says it cannot exceed 10MB. How can we submit?	If a combined PDF file of all three years' financial statements is too large to be uploaded, applicants may upload multiple additional files into the "Grantee Document Folder" in the Forms Menu of the online application. Please label any uploaded files clearly.
309	Technical - Grantee Documents	My question is how do I update my file so I cannot have expired documents and be able to apply for the SHCFTP II grant. Please note we are compliant with filing requirements with the IRS regarding 990 and audit., but there is nowhere to note or apply with expired documents. 2017 filings do not require an extension letter as the deadline has not yet arrived. How do I apply without 2017's 990 and audit?	For technical questions on Grants Gateway prequalification, please contact the Department's Prequalification unit at 518-474-7896.

Q#	Category	Question	Answer
310	Technical - Grantee Document Folder	Grants Gateway - Grantee Document Folder: Can you define what this section should be used for, i.e. letters of support, statistical information, etc. If so, are we able to upload multiple files in this section or should we use a "zip" file?	If an applicant would like to submit additional documentation such as tables, charts, graphs and maps to support the narrative response, such documentation may be uploaded in one or more PDF documents into the "Grantee Document Folder" in the Forms Menu of the online application. Please clearly label any uploaded files.
311	Technical - Grants Gateway Roles	I see that all of us who are listed in the Org members are listed as grantee delegated administrators, is this different from "Grantee"?	Yes. As a Grantee Delegated Administrator, you cannot work on an application. You may use your Grantee Delegated Administrator account to issue additional accounts with the needed roles. Please refer to pages 10-11 of the RFA for roles in the Grants Gateway.
312	Technical - Grants Gateway Roles	I am registered as a "Grantee System Administrator" which according to the instructions is able to initiate an application. If I need to change my designation, how do I do this?	A Grantee System Administrator is able to initiate an application. Consult the Grantee Quick Start Guide for applications: http://grantsreform.ny.gov/sites/default/files/grantee_quick_start_guide.pdf Grants Gateway tech support is available from the Agate Software Help Desk at 1-800-820-1890.
313	Technical - Grants Gateway Roles	I have to remove a person off of our roster. Who could help me process this request?	See answer to question #312.
314	Technical - Master Grant Contract	When should Master Grant Contract be sent? Who should fill the items from the Master Contract (Contract Number/Contractor SFA Payee Name/Agency Identifier/CFDA Number/Business Unit/Contractor DOS Incorporated Name and etc.)? During which period will the Federal ID be issued after the submission of the Registration Form for Administrator and Form W-9?	A sample New York State Master Contract for Grants can be found in the Forms Menu once an application is started in Grants Gateway. State agencies review proposals on the system and make their awards. Only after award will the Gateway automatically generate a standardized draft contract for review, approval and electronic signature from the applicant. Post-award, DOH will be in contact with the applicant to discuss this process and the terms of the contract.
315	Technical - Master Grant Contract	We would like to know how to fill the spots of Master Grant Contract with DOH. In Attachment C - Work Plan of Master Grant Contract (MGC) with DOH there is very little space for description. Should we widen this part of the contract and describe all goals/objects/purposes of project or give just brief information about the project? If we understand properly this contract should be printed, filled manually and sent by applicants.	No. The contract should <u>not</u> be printed, filled manually and sent by applicants. The contract provided is a sample for reference and will be used with only awarded applicants. Applicants must complete the "Work Plan: Grantee Defined" sections of the Forms Menu in Grants Gateway and provide a brief description of their project. The program specific questions are where the bulk of the project proposal will be explained by applicants.
316	Technical - Program Specific Questions	The RFP does not offer specific guidance on how long sections of the narrative should be. More specific direction would be very helpful.	The application questions outlined in RFA Section V. "Completing the Application," page 19, can be found in Grants Gateway under "Program Specific Questions." The text boxes provided for responses to the Program Specific Questions have a character limit, specified immediately below the text box.
317	Technical - Program Specific Questions	Re: RFA, Page 20, Organizational Capacity, 2b. In Grants Gateway, Program Specific Questions, question 2b and its corresponding response box are missing (as of 1/25/18). The questions and textboxes skip from 2a to 2c. As a result, would you like applicants to place their answers to question 2b (which appears on page 20 of the RFA) in the response box to 2c in the Grants Gateway Program Specific Question area... and then place the response to RFA question 2c in response area 2d in Grants Gateway, and so forth, following this pattern all the way through RFA question 2g mapping to Grants Gateway response 2h? (Or will the Grants Gateway interface be adjusted/corrected?)	In the Program Specific Questions, Applicants should place their answers to question 2b in the response box to 2c and then place the response to RFA question 2c in the response area to 2d and so forth.
318	Technical - Program Specific Questions	Re: Grants Gateway, Question 10a... "Eligible applicants include the following types of organizations: Article 28 General Hospitals, Article 28 Residential Health Care Facilities, Article 28 Diagnostic and Treatment Centers, Article 31 Mental Health Clinics, Article 32 Alcohol and Substance Abuse Treatment Clinics, Article 36 Home Care Providers, and Primary Providers. Please indicate your organization type. Is an applicant allowed to indicate more than one response? If not, what criterion/criteria should the applicant use to prioritize the response it chooses here.	Yes. Applicants are allowed to indicate more than one response to indicate their organization type within the 250 character limit.
319	Technical - Program Specific Questions	In Grants Gateway: what is the instruction for filling out the "Regional Council" question in the Project/Site Address section?	DOH will assign the appropriate Regional Economic Council region. This is not a required field, therefore Eligible Applicants do not need to complete this section.

Q#	Category	Question	Answer
320	Technical - Program Specific Questions	In Grants Gateway: Are there a maximum number of project/site addresses allowed for this submission?	No.
321	Technical - Response Limits	Are there character/word limits involved with each question and if so, what are they?	The response option limit is provided below each text box includes characters with spaces. Graphic elements (tables, charts, maps, etc..) may not be placed in the narrative text boxes for the Program Specific Questions in Grants Gateway. If an applicant would like to submit additional documentation such as tables, charts, graphs and maps to support the narrative response, such documentation may be uploaded in a PDF document into the "Grantee Document Folder" in the Forms Menu of the online application. Please clearly label any uploaded files.
322	Technical - Response Limits	On Grants Gateway site where you are to upload question responses –there is the character requirements for example “ 0-250”. Does this mean just characters, characters with spaces etc.? Uploading tables could be a problem that is why the question is being asked.	See answer to question #321.
323	Technical - Supporting Documents	Citations: Are you expecting citations for items such data referred to in narrative? And if so, should the citations be included in the response to the applicable question and included in the word count or uploaded in a separate document section in Grants Gateway?	Citations are optional. Should an applicant wish to provide additional documentation to support narrative responses, uploads are allowed but not required. Such documentation may include, but is not limited to, community needs assessments, tables, charts, graphs and other reports that support the narrative response.
324	Technical - Supporting Documents	Can Tables and Charts be uploaded to Grants Gateway without distorting their format?	Should an applicant wish to provide additional documentation to support narrative responses, uploads are allowed but not required. Such documentation may include, but is not limited to, community needs assessments, tables, charts, graphs and other reports that support the narrative response.
325	Technical - Work Plan	For the Project Summary of the Grants Gateway Workplan, which allows up to 50,000 characters (approx..12 single-spaced pages), does the funder allow/expect applicants to duplicate some information and narrative content that appears in some of the Program-Specific-Questions responses? Is the funder looking for a <i>more brief</i> or more comprehensive/ <i>inclusive</i> summary in this section?	DOH is looking for an overall description of the work to be performed under the contract. The contractor does not need to re-iterate the application contents.
326	Technical - Work Plan	Where may applicants find guidance on the number of expected objectives, tasks, and/or performance measures to be submitted (along with formal definitions of each of these terms)?	There are no specific requirements regarding the number of objectives, tasks and performance measures to be submitted. Definitions include the following: Objective: The intended accomplishment. Task: A part of the work to be undertaken in meeting the objective. Measure: a quantifiable indicator used to assess how well the organization is achieving its objectives. See RFA Section V, Completing the Application, for general workplan guidance.
327	Technical - Work Plan	Where may applicants find guidance on the <u>allowable/preferred start and end dates</u> for the Work Plan in Grants Gateway?	See "Term of Contract", page 12. Contracts are anticipated to begin July 6, 2018 and run for a period of up to five years.
328	Technical - Work Plan	How much and using what evaluation criteria will reviewers score each component of the Grants Gateway-required Workplan (Overview Form, including Project Summary and Organizational Capacity) and Objectives / Tasks / Performance Measures entered by applicants.	Refer to the RFA for evaluation criteria , including Section III. C., Evaluation Criteria and Section V. C. Review and Award Process.
329	Technical - Workplan	On page 23 of the RFA under 9. Project Timeline an online workplan is mentioned. It says that applicants should refer to Section 6.2.11.3 of the user guide for instructions. In the user guide (version 2.0) the chapter stops at 6.2.11.1. Do the objectives/tasks/performance measures listed in the application constitute the workplan?	In the Forms Menu there is a Work Plan: Grantee Defined section to complete with an Work Plan Overview Form and Objectives. The composition of your grantee defined work plan is at your discretion.
330	Technical Assistance	Section IV; Item B: As we go through the application preparation process, will we be able to contact you or your office with other questions that may arise or is this the only time we have to raise questions.	Grants Gateway tech support is available from the Agate Software Help Desk at 1-800-820-1890. The Grants Reform Team can be reached at 518-474-5595 regarding application completion. Other questions of a technical nature can be directed to the primary contact information noted on the cover of the RFA. No substantive questions will be answered after the due date for questions.

Questions and Answers

Q#	Category	Question	Answer
331	Vendor Responsibility Requirements	Can an applicant sign the Vendor Responsibility Attestation if an on-line Vendor Responsibility Questionnaire has not been updated or created at the OSC website within the last six months?	No. Attachment 5: Vendor Attestation Form is required to file an application. Applicants must either first update or create an on-line Vendor Responsibility Questionnaire within the last six months at Office of the State Comptroller's website: https://portal.osc.state.ny.us or indicate an exemption status such as government entity, public authority, public college or university, public benefit corporations and Indian Nations. Applicants that certify that the online Vendor Responsibility Questionnaire has been updated or created without doing so on OSC's website will be disqualified.
332	Vendor Responsibility Requirements	Does the response to proposal or resulting contract from a vendor meet the vendor responsibility requirement, so long as it details there SOW and delivery deadlines?	Applicants using vendors or subcontractors that will receive in excess of \$100,000 of grant funds must obtain a Vendor Identification Number and submit a Vendor Responsibility Questionnaire. See RFA Section IV, Administrative Requirements.
333	Vendor Responsibility Requirements	Is a vendor responsibility questionnaire required to be submitted for subcontractor as part of this application?	See answer to question #332.

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Equinox, Inc.	Integrated clinic with primary care, behavioral health, and pharmacy	Capital Region	\$ 2,076,484
Upper Hudson Planned Parenthood	Infrastructure and IT improvements to enhance integration, collaboration, and operational efficiency	Capital Region	\$ 2,200,588
Hoosick Falls Health Center, Inc.	Infrastructure and IT improvements to improve resident safety, care quality and operational efficiency	Capital Region	\$ 2,910,893
Baptist Health Nursing and Rehabilitation Center, Inc.	Capital improvements and equipment to provide short- and long-term bariatric nursing home care in Schenectady County	Capital Region	\$ 1,645,321
Glens Falls Hospital	Construct a Medical Village to provide comprehensive ambulatory and telemedicine services	Capital Region	\$ 19,959,105
Family Health Network of Central New York, Inc.	Purchase a vehicle equipped to provide mobile medical and dental care to underserved populations	Central New York	\$ 335,000
Liberty Resources, Inc.	Facility improvements to expand integrated primary care and outpatient behavioral health services	Central New York	\$ 1,651,800
Oswego Hospital	Construct new inpatient and outpatient facility to preserve behavioral health services in Oswego County	Central New York	\$ 13,023,850
Cortland Regional Medical Center, Inc.	Retire long-term debt to enable merger or consolidation with larger regional health care system	Central New York	\$ 19,798,092

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Community Memorial Hospital	Capital improvements to inpatient services and expand integrated outpatient care.	Central New York	\$ 10,000,000
Crouse Health Hospital	Expand outpatient chemical dependency treatment services to meet regional need	Central New York	\$ 16,325,000
Syracuse Community Health Center, Inc.	Capital improvements to expand and integrate urgent care, primary care, behavioral health and substance use disorder services	Central New York	\$ 12,826,250
The Unity Hospital of Rochester	Relocate and expand clinic that provides primary care services for the homeless	Finger Lakes	\$ 3,100,000
United Cerebral Palsy Association of the Rochester Area, Inc.	Acquire electronic health information equipment to better connect collaborative partners and improve services to primarily disabled patient population	Finger Lakes	\$ 248,891
University of Rochester	Facility and equipment improvement projects to expand mobile crisis, behavioral health and addiction services	Finger Lakes	\$ 1,883,724
Finger Lakes Addictions Counseling and Referral Agency- FLACRA	Add 25 behavioral health inpatient rehab integrated with onsite outpatient services to improve transition of patients back to community	Finger Lakes	\$ 3,500,000
Orleans County	Capital improvements to consolidate and integrate county-operated primary care and behavioral health services in a single building	Finger Lakes	\$ 3,682,748

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Nicholas H. Noyes Memorial Hospital, Inc.	Acquire and implement new electronic medical record system to enable integration into University of Rochester Medical Center system	Finger Lakes	\$ 6,300,000
Family and Children's Association	Upgrade technology to improve electronic health record and fiscal management capabilities. Purchase 2 vans to transport patients to treatment	Long Island	\$ 679,675
Jacqueline Delmont, MD, PC (d/b/a Delmont Medical Care)	Expand and upgrade physical and technology infrastructure at 4 practice sites to increase direct primary care and incorporate behavioral health services	Long Island	\$ 1,480,782
Nassau Health Care Corporation	Support hospital's urgent repairs and upgrades program	Long Island	\$ 25,000,000
SCO Family of Services	Capital improvements to co-locate outpatient mental health, substance use disorder, and primary care services	Long Island	\$ 933,000
Pederson Krag Center, Inc.	Capital improvements to co-locate outpatient mental health, substance use disorder, and primary care services	Long Island	\$ 1,255,000
J&P Watson, Inc. (d/b/a Interim Healthcare of Greater NY)	Purchase health information technology to improve patient experience and integration of home care services with collaborating providers	Long Island	\$ 349,000
Advantage Care Diagnostic and Treatment Center, Inc.	Expand Freeport Health Center to meet patient demand	Long Island	\$ 1,210,745

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Catholic Charities of the Diocese of Rockville Centre Inc	Install ramps and create physicians office to expand access to mobility impaired clients for mental health, substance abuse and primary care services	Long Island	\$ 137,375
Mercy Medical Center	Construct new outpatient center to expand access to primary care and specialty ambulatory services	Long Island	\$ 7,325,000
WSNCHS North, Inc.	Expand inpatient detoxication and substance abuse rehabilitation services at St. Joseph's hospital	Long Island	\$ 5,460,000
Brookhaven Health Care Facility, LLC	Reduce hospital re-admission rate by implementing Telestat Restorative Care Unit Project (capital costs)	Long Island	\$ 200,000
Brookhaven Health Care Facility, LLC	Reduce hospital re-admission rate by implementing Telestat Restorative Care Unit Project (start-up operating costs)	Long Island	\$ 1,520,940
The Eastern Long Island Hospital Association	Relocate and expand outpatient addiction treatment services and construct supportive, recovery-focused housing	Long Island	\$ 1,656,650
The Institute for Family Health	Create call center to facilitate 24-hour-a-day communication with patients across 27 clinic network	Mid-Hudson	\$ 1,882,642
Cornerstone Family Healthcare	Expand primary care clinic to meet demand for services in Newburgh	Mid-Hudson	\$ 3,750,000
St Luke's Cornwall Hospital	Improve facilities to better provide emergency and non-emergency services at the Newburgh hospital campus	Mid-Hudson	\$ 8,049,686

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Ulster Home Care, Inc.	Debt restructuring to improve financial condition as part of plan to integrate into larger health care system	Mid-Hudson	\$ 490,000
Bethel Nursing Home Company, Inc	Renovate 43 bed nursing home to improve quality of care through telehealth and renovations that create a more patient-centered environment	Mid-Hudson	\$ 2,500,000
Open Door Family Medical Center, Inc.	Construct new primary care clinic that will also host Phelps Family Medicine Residency Program	Mid-Hudson	\$ 3,737,629
Visiting Nurse Association of Hudson Valley	Debt retirement to strengthen financial position to facilitate affiliation with a regional health care network	Mid-Hudson	\$ 1,234,946
Westchester Institute for Human Development	Purchase of a medical/dental mobile health unit to provide access to healthcare services for patients with severe intellectual and/or developmental disabilities	Mid-Hudson	\$ 376,826
White Plains Hospital Medical Center	Purchase and renovate a building to house integrated primary care and behavioral health services	Mid-Hudson	\$ 7,500,000
Montefiore Health System Inc.	Montefiore Mount Vernon Medical Village--Construct a comprehensive, multi-specialty outpatient facility and a new emergency department	Mid-Hudson	\$ 65,000,000

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Nathan Littauer Hospital Association	Design, construct, and equip a new primary and specialty care facility on the hospital campus to improve access to care	Mohawk Valley	\$ 2,995,689
Rome Memorial Hospital Inc.	Acquire an existing medical office complex to develop an outpatient medical village with primary care, substance abuse and behavioral health services	Mohawk Valley	\$ 7,993,000
Trustees of the Eastern Star Hall & Home of the State of New York, Inc.	Transform and restructure facility by decertifying skilled nursing beds and replacing with assisted living beds, a memory care unit, and enriched housing beds	Mohawk Valley	\$ 2,997,067
1211 WPR Medical Services, PC	Acquire property and construct a new medical building to increase capacity for primary and specialty care	New York City	\$ 2,700,000
La Casa De Salud	Capital improvements to accommodate expanded integrated and co-located primary care, mental health, substance use, dental, and optometry services	New York City	\$ 2,626,050
St. Barnabas Hospital	Construct an urban medical village that will integrate primary care and behavioral health with comprehensive health and wellness education programming. Facility will be co-located with affordable housing.	New York City	\$ 22,653,460
Union Community Health Center, Inc.	Purchase a mobile medical van to provide primary and specialty care to medically underserved areas	New York City	\$ 475,834

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Brownsville Community Development Corporation	Capital improvements to pediatrics department and adult medicine, replacement of roof and HVAC units, and renovation of patient restrooms	New York City	\$ 888,150
Catholic Charities Neighborhood Services, Inc.	Renovation of existing clinic and construction of a new clinic to offer co-located comprehensive primary care and behavioral health services	New York City	\$ 2,636,853
Center for Alternative Sentencing & Employment Services	Retire debt associated with clinic renovations to support primary care integration, upgrade EHR system, and fund consultants for value-based payment planning	New York City	\$ 375,000
Ditmas Park Rehabilitation and Care Center LLC	Establish an onsite diagnostics center to enhance resident chronic disease management	New York City	\$ 356,856
Housing Works Health Services III, Inc. (d/b/a Housing Works Community Healthcare)	Renovations and capital improvements to enable integration of behavioral health services	New York City	\$ 1,000,000
ICL HealthCare Choices	Construction of two dental suites and acquisition of equipment to enable provision of pediatric and adult dental services	New York City	\$ 233,737
HELP/PSI Services Corp. (d/b/a Brightpoint Health)	Renovate existing health center space to offer integrated, co-located primary medical, behavioral health and oral health care services	New York City	\$ 2,435,488
Selfhelp Community Services	Infrastructure and IT improvements to provide integrated health care, community-based services and supports	New York City	\$ 1,110,865

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
SUS-Mental Health Programs, Inc.	Renovation of space to co-locate primary care and behavioral health services	New York City	\$ 617,104
Home for the Aged of the Little Sisters of the Poor	Capital improvements to facility exterior, phone system, and purchase of medical equipment	New York City	\$ 1,130,400
Joseph P. Addabbo Family Health Center, Inc.	Expand and renovate existing health center to increase capacity for service delivery	New York City	\$ 2,500,000
The Jamaica Hospital	Capital improvements to expand ambulatory care space, create urgent care center, and renovate entrance to the emergency department	New York City	\$ 5,992,300
The Silvercrest Center for Nursing and Rehabilitation	Purchase of patient clinical monitoring system to reduce avoidable transfer and hospitalization of ventilator dependent patients	New York City	\$ 794,200
Beacon Christian Community Health Center	Purchase medical outreach van to provide mobile medical services in underserved communities	New York City	\$ 800,723
Beacon Christian Community Health Center	Purchase dental outreach van to provide mobile dental services in underserved communities	New York City	\$ 819,235
Richmond Medical Center	Renovate five sites to integrate behavioral health services and primary medical care services and to facilitate merger with another organization	New York City	\$ 6,587,475
Brooklyn Plaza Medical Center, Inc.	Establish a new integrated health center for comprehensive primary and behavioral health care	New York City	\$ 3,518,762

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Brownsville Community Development Corporation	Retire long-term debt to better position organization for value-based payment arrangements	New York City	\$ 3,393,121
Brownsville Community Development Corporation	Capital improvements to renovate non-clinical space to be designated as a centralized Care Coordination Hub and Workforce Development Training Center	New York City	\$ 424,090
Premium Health, Inc.	Design, construct and equip a multi-service facility that will provide integrated, primary, specialty, and behavioral women's health care services	New York City	\$ 4,000,000
The Brooklyn Hospital Center	Capital improvements to modernize emergency department	New York City	\$ 25,221,716
Care for the Homeless	Capital improvements to ensure Article 28 compliance at multiple facilities, including repairs, renovation, installation of HVAC systems and ADA compliance	New York City	\$ 2,494,150
Ozanam Hall of Queens Nursing Home, Inc.	Renovate and expand cardiac rehabilitation department to reduce unnecessary hospitalizations	New York City	\$ 2,725,500
Rockaway Care Center	Renovations to establish "safe room" and purchase telemedicine equipment to reduce hospitalizations and better serve residents with behavioral health conditions	New York City	\$ 400,731

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Alice Hyde Medical Center	Capital improvements to renovate and expand office building to create a multi-disciplinary primary care center	North Country	\$ 1,300,000
U.S. Care Systems, Inc.	Acquire property, renovate, and purchase software and equipment needed to expand home care services into Jefferson County	North Country	\$ 446,381
United Cerebral Palsy Association of the North Country, Inc.	Construction project to establish a new Federally Qualified Health Center to provide integrated primary care, dental, and behavioral health services for general population and patients with developmental disabilities	North Country	\$ 3,391,245
Champlain Valley Physicians Hospital Medical Center	Renovate space to consolidate specialty services on main hospital campus	North Country	\$ 5,894,736
River Hospital Inc.	Construct medical office building to house integrated behavioral health and primary care services and capital improvements to renovate and relocate emergency, ambulatory surgery, and radiology departments	North Country	\$ 9,507,603
Samaritan Medical Center	Renovate and expand an existing building to create a comprehensive health center that integrates outpatient mental health services with primary care	North Country	\$ 9,809,862

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Oak Orchard Community Health Center	Purchase of medical, dental, office, and IT equipment necessary for primary care center in a medical village	Southern Tier	\$ 665,000
Schuyler Hospital Inc.	Construction of a primary care hospital-based clinic, and repurposing of inpatient space to enhance outpatient specialty services capacity	Southern Tier	\$ 10,304,060
Finger Lakes Migrant Health Care Project, Inc.	Construction of a health center in Bath (Steuben County) that will integrate primary care and behavioral health	Southern Tier	\$ 2,150,000
Arnot Ogden Medical Center	Capital improvements to expand and renovate the Emergency Department	Southern Tier	\$ 10,000,000
Chenango Memorial Hospital Inc.	Construction to renovate and reconfigure existing ambulatory services space to co-locate imaging, emergency services, behavioral health, urgent care, and observation	Southern Tier	\$ 9,000,000
St. James Mercy Hospital	Capital construction and equipment costs associated providing radiology and surgical services for the new St. James Mercy Hospital. Land acquisition costs for alternative site for new Hospital	Southern Tier	\$ 7,965,102
The Chautauqua Center	Renovate a building to provide primary medical care, behavioral health/substance abuse services, dental care, care coordination and other ancillary services	Western New York	\$ 3,500,000

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Harris Hill Nursing Facility, LLC	Purchase equipment for implementation of a telemedicine platform that will allow remote access between patients and providers in the advanced care unit	Western New York	\$ 200,000
Eastern Niagara Hospital Inc.	Construction of a medical office building for co-location of primary, specialty, and behavioral health care services and IT improvements to enhance integration	Western New York	\$ 5,921,650
Mount St. Mary's Hospital of Niagara Falls	Capital improvements to convert medical beds to a chemical dependency rehabilitation center	Western New York	\$ 825,200
Odd Fellow & Rebekah Rehabilitation & Health Care Center, Inc.	Purchase equipment for telemedicine program implementation to reduce unnecessary patient transfer and hospitalization	Western New York	\$ 221,559
The Memorial Hospital of William F. and Gertrude F. Jones, Inc	Acquire and implement new electronic medical record system to enable integration into University of Rochester Medical Center system	Western New York	\$ 5,700,000
Bertrand Chaffee Hospital	Relocate existing primary care center within a new multi-specialty standalone health center to increase capacity for primary and specialty care access	Western New York	\$ 11,319,515

Statewide Health Care Facility Transformation Program Awards

Provider	Project	Region	Award Amount
Kaleida Health	IT consolidation to bring multiple hospitals under one platform and capital costs for construction of a new Brooks Memorial Hospital	Western New York	\$ 17,000,000
			\$ 491,217,111