

**Minnesota Department of Health
Safety Net Transformation RFP Q&A**

Date	Question	Answer
4/18/11	Could you please tell me if the lead applicant for the Community Care Team grants and the Safety Net Clinic Primary Care Transformation grants has to be located in Minnesota?	The applicant organization could be from another State; however the Safety Net Clinics and the Certified Health Care Homes must be located in Minnesota and serve primarily Minnesotans. Will be based on their ability to be present on site working with the clinics as they work on their transformation.
4/21/11 Bidders call	Please clarify as to the types of support and technical assistance that is intended; could any funding be used to support a care coordination position; or are these intended to be training and technical assistance resources?	These funds are not intended to support actual personnel to implement services. Page 5 of the RFP describes funding restrictions. These funds can be used for things such as personnel to facilitate project support, facilitate teams, to implement work, do assessment of staffing patterns; and consider redefining staff functions. Dollars are not to be used to pay for direct care coordination or clinic services.
4/21	Could these funds be used for incentives for patient participation on care teams	No, this grant would not include these patient incentives. There may be opportunities for these in other grants.
4/21	Please clarify – it seems you expect the grantee to provide support to a number of clinics. Will there be just one grant award and the application needs to work with multiple clinics?	Yes – we are looking at the grantee working with up to 5 clinics. We believe the grantee might actually be present in the clinic one day a week or one day every other week related to support work and strategic meetings, as well as assisting with other work looking for resources, looking at EMR resources, etc. This is a ‘leg work’ person to work directly with clinics to assist leadership in identifying resources, and to support their development of a quality development team. This is about helping clinics get things done that busy administrators don’t have time to do to support primary care transformation.
4/21	Do the clinics need to be identified on the application?	No - the actual clinics do not need to be defined in the application. Page 4 of the RFP describes that the application should include the process the applicant will use to solicit applications from safety net providers and how will they determine who are the best entities to participate.
4/21	Can you define what a federally safety net clinic is?	We are using federal definition for FQHC, FQHC look-alikes and other community clinics that provide services to patients that are typically part of the safety net. We left that broad and that will be one of the things that the grantee would help to define in the clinic application process.
4/21	It seems there is some flexibility with the time that clinics will apply for and receive assistance from the grantee. Is that correct?	Yes – there is that flexibility. Whether the clinic will proceed with HCH certification will be determined by the assessment. Our goal is to impact Primary Care transformation, with use of rapid cycle techniques, quick assessments strategy & tools to do an assessment, set a plan and launch. Some clinics have already started on this transformation so clinics will have different needs and different starting places.
	Statement fr/MMV – Is this grant just for the metro area?	This project is not intended only for the metro area. If applicants are taking a broader geographic approach, we would be interested to know how they would work together and do that efficiently.
	Statement fr/MMV	Page 9 spells out requirements of application – contents and page limitations.

**Minnesota Department of Health
Safety Net Transformation RFP Q&A**

Date	Question	Answer
	Statement fr/MMV	We will turn this around very quickly. We need to have a contract by around June 1 st and the contract needs to be finalized and fully executed by 6/30/2011.
4/29/11	Could these funds be used to pay for implementation of a learning collaborative?	Education and community learning is an important part of implementation and there may be tools that have been implemented for other learning collaboratives, this grant is not focused on implementation of a learning collaborative. See the description above. This grant is focused on onsite leadership and team support for primary care transformation.
4/29/11	Could these funds be used to pay for stipends for patients to participate in team quality meetings?	Yes this would be considered an administrative expense, similar to payments for other team members.
4/29/11	Can the grant be used to fund more than five FQHC's?	Applicants should justify the scope of their work based on the grant criteria and the number of clinics that the resources of the grant can support.