



# FY 2027 Mental Health Safety Net Grant Program

NOTICE OF GRANT OPPORTUNITY (NOGO)

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07/13/2026

To obtain this information in a different format, call: 651-201-3780.

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## NOGO Part 1: Overview

### 1.1 General Information

- **Announcement Title:** FY 2027 Mental Health Safety Net Grant Program Notice of Grant Opportunity (NOGO)
- **Minnesota Department of Health (MDH) Program Website:** [Mental Health Safety Net Grant Program - ORHPC Grants and Funding - MN Dept. of Health](#)
- **Letter of Intent Deadline:** August 27, 2026 at 4:30 p.m. Central Time
- **Application Deadline:** October 23, 2026 at 4:30 p.m. Central Time

### 1.2 Program Description

[Minnesota Statute 145.929](#) authorizes the Commissioner of Health to award grants to support eligible mental health providers who serve uninsured youth under age 21. Funds will be awarded each year proportionally among all eligible applicants based on the total number of uninsured patients under the age of 21 served.

### 1.3 Funding and Project Dates

#### Funding

The Legislature appropriated \$394,000 for Fiscal Year 2027.

Eligible mental health organizations will receive a percentage of the available funding based on a ratio of the number of individual uninsured patients under the age of 21 with family incomes below 275% of the federal poverty guidelines served by each provider to the total number of individual uninsured patients under the age of 21 with family incomes below 275% of the federal poverty guidelines served by all eligible providers.

As determined by statute, no single eligible provider will receive less than 2 percent or more than 30 percent of the total appropriation for this grant.

The Mental Health Safety Net grant project period will be January 1, 2027, to December 31, 2027.

Funding	Estimate
Estimated Amount to Grant	\$394,000
Estimated Number of Awards	Based up on number of eligible applicants
Estimated Award Maximum	\$118,200.00
Estimated Award Minimum	\$7,880.00

#### Match Requirement

There is no match requirement for this grant.

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## Project Dates

- Application Open: July 13, 2026
- Letter of Intent Deadline: August 27, 2026, 4:30 p.m. Central Time
- Grant Distribution Announcement: Week of September 22, 2026
- Application Deadline: October 23, 2026, 4:30 p.m. Central Time
- Grant Agreements begin (estimate): January 1, 2027
- Grant Agreements end: December 31, 2027

## 1.4 Eligible Applicants

Eligible applicants are provider organizations that are *either*:

- Community Mental Health Centers or Clinics, designated under [Minnesota Statute section 245.62](#); or,
- Nonprofit Community Mental Health Clinics designated as an Essential Community Provider under [Minnesota Statute section 62Q.19](#).
- Additionally, eligible providers must:
- Offer free or reduced-cost mental health care to low-income patients under the age of 21 with family incomes below 275 percent of federal poverty guidelines who do not have health insurance coverage.

[Minnesota Statute 145.929](#) authorizes three safety net grant programs. An organization must not receive more than one grant under subdivision 1 ([Dental Safety Net Grant Program](#)), 2 ([Mental Health Safety Net Grant Program](#)), or 3 ([Hospital Safety Net Grant Program](#)), even though the organization may be eligible for a grant under two or more subdivisions.

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

## 1.5 Questions and Answers

All questions regarding this NOGO must be submitted by email or phone to [health.SafetyNetGrants@state.mn.us](mailto:health.SafetyNetGrants@state.mn.us) or 651-201-3780. All answers will be posted within five business days at [Mental Health Safety Net Grant Program - ORHPC Grants and Funding - MN Dept. of Health](#).

Please submit questions no later than 4:30 p.m. Central Time, on August 14, 2026.

To ensure the proper and fair evaluation of all applications, other communications regarding this NOGO including verbal, telephone, written or internet initiated by or on behalf of any applicant to any employee of MDH, other than questions submitted to as outlined above, are prohibited. **Any violation of this prohibition may result in the disqualification of the applicant.**

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### **NOGO Information Meeting**

An informational webinar will be held on Tuesday, August 4, 2026, at 9:30 a.m. [Join the Teams meeting.](#)

Materials from the meeting, including questions and answers, will be posted by 4:30 p.m. on August 11, 2026 at [Mental Health Safety Net Grant Program - ORHPC Grants and Funding - MN Dept. of Health.](#)

## **NOGO Part 2: Program Details**

### **2.1 Priorities**

#### **Health Equity Priorities**

The purpose of the grant is to defray costs for providing mental health services to uninsured youth under age 21.

This grant will serve:

Community mental health providers that serve uninsured mental health patients under the age of 21.

Grant outcomes will include:

Increased support for community mental health providers who serve and/or treat uninsured mental health patients under the age of 21.

### **2.2 Eligible Projects**

Grant projects must provide mental health services to uninsured youth under age 21. Eligible expenditures may only be incurred when the grant agreement is fully executed, and the grant has reached its effective date. Eligible expenses include:

- Salaries
- Fringe
- Supplies
- Travel
- Training
- Equipment
- Capital Improvements
- Contracted Services
- Other (Define)

#### **Ineligible Expenses**

Ineligible expenses include but are not limited to:

- Solicitating donations
- Taxes, except sales tax on goods and services
- Lobbyists, political contributions
- Bad debts, late payment fees, finance charges, or contingency funds
- Indirect expenses

## 2.3 Grant Management Responsibilities

### Grant Agreement

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. The grantee is expected to read the grant agreement, sign, and comply with all conditions of the grant agreement. Grantee should provide a copy of the grant agreement to all grantee staff working on the grant.

No work on grant activities can begin until a fully executed grant agreement is in place.

A sample grant agreement is available for review on [MDH Grant Resources](#). Applicants should be aware of the terms and conditions of the standard grant agreement in preparing their applications. Much of the language reflected in the sample agreement is required by statute. If an applicant takes exception to any of the terms, conditions or language in the sample grant agreement, the applicant must indicate those exceptions, in writing, in their application in response to this NOGO. Certain exceptions may result in an application being disqualified from further review and evaluation. Only those exceptions indicated in an application will be available for discussion or negotiation.

The funded applicant will be legally responsible for assuring implementation of the work plan and compliance with all applicable state requirements including worker's compensation insurance, nondiscrimination, data privacy, budget compliance, and reporting.

### Accountability and Reporting Requirements

It is the policy of the State of Minnesota to monitor progress on state grants by requiring grantees to submit written progress reports with each invoice until all grant funds have been expended and all the terms in the grant agreement have been met.

The reporting schedule will be bi-annually. Reports will be submitted through the Office of Rural Health and Primary Care's online grant portal. A report form will be provided to grantees.

Reports will be due 20 days after each six months per the following schedule:

Annual reporting schedule	Date Due to MDH
January 1 <sup>st</sup> – June 30 <sup>th</sup>	July 20 <sup>th</sup>
July 1 <sup>st</sup> – December 31 <sup>st</sup>	January 20 <sup>th</sup>

**The final report will be due on January 30, 2028.**

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## Grant Monitoring

[Minn. Stat. § 16B.97](#) and [Policy 08-10 on Grant Monitoring \(PDF\)](#) require the following:

- One monitoring visit during the grant period on all state grants over \$50,000
- Annual monitoring visits during the grant period on all grants over \$250,000
- Conducting a financial reconciliation of grantee's expenditures at least once during the grant period on grants over \$50,000.

The monitoring schedule will be jointly determined with the grantee if required.

## Technical Assistance

All questions regarding this NOGO must be submitted by email or phone to [health.SafetyNetGrants@state.mn.us](mailto:health.SafetyNetGrants@state.mn.us) or 651-201-3780.

## Grant Payments

Per [State Policy 08-08 on Grant Payments \(PDF\)](#), reimbursement is the method for making grant payments. All grantee requests for reimbursement must correspond to the approved grant budget. The State shall review each request for reimbursement against the approved grant budget, grant expenditures to-date and the latest grant progress report before approving payment. Grant payments shall not be made on grants with past due progress reports unless MDH has given the grantee a written extension.

The invoicing and payment schedule will be every six months.

Invoices for reimbursement of grant expenditure must include supporting documentation for proof of expenditures. Reimbursements will not be processed until the narrative progress report is received.

## 2.4 Grant Provisions

### Affirmative Action and Non-Discrimination Requirements for all Grantees

The grantee agrees to comply with applicable state and federal laws prohibiting discrimination.

Minnesota's nondiscrimination law is the Minnesota Human Rights Act (MHRA) [Minn. Stat. § 363A](#); See e.g. [Minn. Stat. § 363A.02](#).

The MHRA is enforced by the [Minnesota Department of Human Rights](#). Some, but not all, MHRA requirements are reflected below.

All grantees are responsible for knowing and complying with nondiscrimination and other applicable laws.

The grantee agrees not to discriminate against any employee or applicant for employment because of race, color, creed, religion, national origin, sex, marital status, status in regard to public assistance, membership or activity in a local commission, disability, sexual orientation, or age in regard to any position for which the employee or applicant for employment is qualified.

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The grantee agrees not to discriminate in public accommodations because of race, color, creed, religion, national origin, sex, gender identity, sexual orientation, and disability.

The grantee agrees not to discriminate in public services because of race, color, creed, religion, national origin, sex, gender identity, marital status, disability, sexual orientation, and status with regard to public assistance.

The grantee agrees to take affirmative steps to employ, advance in employment, upgrade, train, and recruit minority persons, women, and persons with disabilities.

The grantee must not discriminate against any employee or applicant for employment because of physical or mental disability in regard to any position for which the employee or applicant for employment is qualified.

The grantee agrees to take affirmative action to employ, advance in employment, and otherwise treat qualified disabled persons without discrimination based upon their physical or mental disability in all employment practices such as the following: employment, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. [Minn. Rules, part 5000.3550](#).

## Audits

Per [Minn. Stat. § 16B.98](#), subd. 8, the grantee's books, records, documents, and accounting procedures and practices of the grantee or other party that are relevant to the grant or transaction are subject to examination by the granting agency and either the legislative auditor or the state auditor, as appropriate.

This requirement will last for a minimum of six years from the grant agreement end date, receipt, and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later.

## Conflicts of Interest

MDH will take steps to prevent individual and organizational conflicts of interest, both in reference to applicants and reviewers per [Minn. Stat. § 16B.98](#) and the [Office of Grants Management's Policy 08-01, "Conflict of Interest Policy for State Grant-Making."](#) (PDF).

**Applicants must complete the [Applicant Conflict of Interest Disclosure form \(PDF\)](#) and submit it as part of the completed application.** Failure to complete and submit this form will result in disqualification from the review process.

Organizational conflicts of interest occur when:

- A grantee or applicant is unable or potentially unable to render impartial assistance or advice
- A grantee's or applicant's objectivity in performing the grant work is or might be otherwise impaired
- A grantee or applicant has an unfair competitive advantage
- Individual conflicts of interest occur when:
  - An applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH's time, services, facilities, equipment, supplies, prestige, or influence
  - An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this NOGO/project.
  - An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.
  - An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

In cases where a conflict of interest is perceived, disclosed, or discovered, the applicants or grantees will be notified and actions may be pursued, including but not limited to disqualification from eligibility for the grant award or termination of the grant agreement.

## Non-Transferability

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

## Public Data and Trade Secret Materials

All applications submitted in response to this NOGO will become property of the State. In accordance with [Minn. Stat. § 13.599](#), all applications and their contents are private or nonpublic until the applications are opened.

Once the applications are opened, the name and address of each applicant and the amount requested is public. All other data in an application is private or nonpublic data until completion

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of the evaluation process, which is defined by statute as when MDH has completed negotiating the grant agreement with the selected applicant.

After MDH has completed the evaluation process, all remaining data in the applications is public with the exception of trade secret data as defined and classified in [Minn. Stat. § 13.37](#), subd. 1(b). A statement by an applicant that the application is copyrighted or otherwise protected does not prevent public access to the application or its contents. ([Minn. Stat. § 13.599](#), subd. 3(a)).

If an applicant submits any information in an application that it believes to be trade secret information, as defined by [Minn. Stat. § 13.37](#), the applicant must:

- Clearly mark all trade secret materials in its application at the time it is submitted,
- Include a statement attached to its application justifying the trade secret designation for each item, and
- Defend any action seeking release of the materials it believes to be trade secret, and indemnify and hold harmless MDH and the State of Minnesota, its agents and employees, from any judgments or damages awarded against the State in favor of the party requesting the materials, and any and all costs connected with that defense.
- This indemnification survives MDH's award of a grant agreement. In submitting an application in response to this NOGO, the applicant agrees that this indemnification survives as long as the trade secret materials are in possession of MDH. The State will not consider the prices submitted by the responder to be proprietary or trade secret materials.

MDH reserves the right to reject a claim that any particular information in an application is trade secret information if it determines the applicant has not met the burden of establishing that the information constitutes a trade secret. MDH will not consider the budgets submitted by applicants to be proprietary or trade secret materials. Use of generic trade secret language encompassing substantial portions of the application or simple assertions of trade secret without substantial explanation of the basis for that designation will be insufficient to warrant a trade secret designation.

If a grant is awarded to an applicant, MDH may use or disclose the trade secret data to the extent provided by law. Any decision by the State to disclose information determined to be trade secret information will be made consistent with the [Minnesota Government Data Practices Act \(Ch. 13 MN Statutes\)](#) and other relevant laws and regulations.

If certain information is found to constitute trade secret information, the remainder of the application will become public; in the event a data request is received for application information, only the trade secret data will be removed and remain nonpublic.

## 2.5 Review and Selection Process

### Review Process

Upon receipt of the grant application Letter of Intent (LOI), MDH will calculate the total dollar amount of grant funding by formula, determined by statute, as follows:

Eligible mental health organizations who submit a complete application will receive a percentage of the available funding based on a simple ratio of the number of individual uninsured patients under the age of 21 served by each provider, as a portion of the total number of individual uninsured patients under the age of 21 patients served by all eligible providers.

No single eligible provider will receive less than 2 percent or more than 30 percent of the total appropriation for this grant.

**The award decisions of MDH are final and not subject to appeal.** Additionally:

- MDH reserves the right to withhold the distribution of funds in cases where proposals submitted do not meet the necessary criteria.
- The NOGO does not obligate MDH to award a grant agreement or complete the project, and MDH reserves the right to cancel this NOGO if it is considered to be in its best interest.
- MDH reserves the right to waive minor irregularities or request additional information to further clarify or validate information submitted in the application, provided the application, as submitted, substantially complies with the requirements of this NOGO. There is, however, no guarantee MDH will look for information or clarification outside of the submitted written application. Therefore, it is important that all applicants ensure that all sections of their application are complete to avoid the possibility of failing an evaluation phase or having their score reduced for lack of information.

### Notification

MDH anticipates notifying all applicants via email of their grant formula distribution by September 25, 2026.

## NOGO Part 3: Application and Submission Instructions

Applicants **MUST** submit a Letter of Intent by August 27, 2026, at 4:30 p.m. Central Time. If the Letter of Intent is not received by the deadline, then any application in response to this NOGO will **NOT** be accepted and considered. Submitting a Letter of Intent does not obligate the sender to submit an application to this NOGO.

All Letter of Intent (LOI) applications must be submitted online through the [ORHPC Online Grant Portal](#) no later than 4:30 p.m. Central Time on August 27, 2026.

### 3.1 Application Deadline

Once the grant distribution is determined and sent back to the eligible organizations, all work plan and budget applications must be received by MDH no later than 4:30 p.m. Central Time on October 23, 2026.

**Late applications will not be accepted.** It is the applicant's sole responsibility to allow sufficient time to address all potential delays caused by any reason whatsoever. MDH will not be responsible for delays caused by mail, delivery, computer, or technology problems.

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

If you do not receive an automated email confirming submission, or encounter any other issues with the online application, please contact Bekah Ehlebracht promptly at [health.SafetyNetGrants@state.mn.us](mailto:health.SafetyNetGrants@state.mn.us) 651-201-3780. We encourage you to submit in advance of the deadline to allow time to address any technical issues.

## 3.2 Application Submission Instructions

Applications must be submitted electronically through the [ORHPC Online Grants Portal](#).

Please reference the [ORHPC Grant Guide \(PDF\)](#) for information on account creation, password recovery, application creation, and collaboration.

Accessing Online Portal Accounts:

- **Existing users:** If your organization has a grant with the ORHPC, and you already have a user account, please enter your credentials and log-in. If you forgot your passwords, please use the “Forgot your Password?” link to reset your password.
- **New users:** If your organization does not already have a profile in the system, you will need to create an account. Please click on “Create New Account” to complete the registration process and create your logon credentials.
- **Unknown:** If you think that you or someone at your organization has already registered your organization in the system, do not create a new account. Please contact the program administrator at [health.SafetyNetGrants@state.mn.us](mailto:health.SafetyNetGrants@state.mn.us) to receive a username and password.

Once in the system, click on the link “apply” located on the upper tool bar on the home page. You will be redirected to a list of open applications in the system; select the appropriate program. Refer to NOGO Parts 4 and 5 for further instructions on how to address application questions outlined in the online portal.

If you have any questions, please submit them to: [health.SafetyNetGrants@state.mn.us](mailto:health.SafetyNetGrants@state.mn.us).

## **NOGO Part 4: Letter of Intent Instructions**

### **Section 1: Organization and Applicant Information**

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

### **Section 2: Project Information**

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

### **Section 3: Letter of Intent**

#### **Organization Description**

A description of the organization in 1 – 3 paragraphs.

#### **Total Number of Uninsured Youth Under Age 21 Receiving Mental Health Services**

Enter the total number of uninsured mental health patients (not encounters) under age 21 served from July 1, 2025 – June 30, 2026.

### **Section 4: Required Attachments**

#### **Qualifying Data**

Please upload the [Qualifying Data Attestation Form \(PDF\)](#). Questions on this form include:

- Number of Uninsured Patients (not encounters) Under Age 21 Receiving Mental Health Services between July 1, 2025 and June 30, 2026
- Source of Data (how did you determine this number)
- Name and Title of Person Providing Qualifying Data
- Signature and Date

#### **Reduced Cost Care Documentation**

Please upload documentation showing that the clinic offers free or reduced-cost mental health care to patients under the age of 21 with family incomes below 275 percent of the federal poverty guidelines who do not have insurance for mental health services.

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## Provider Status Documentation

Please upload documentation showing current Community Mental Health Center or Essential Community Provider status.

## Section 5: Applicant Conflict of Interest Disclosure

The Minnesota Department of Health (MDH) requires all applicants to complete a conflict of interest statement prior to award of funds in accordance with federal, state and agency policies. **The Conflict of Interest form is a required part of the online application.**

All responses to the [Applicant Conflict of Interest Disclosure form \(PDF\)](#) will be completed as a part of the online application, there is no attachment for the Conflict of Interest.

**All costs incurred in responding to this NOGO will be borne by the applicant.**

## **NOGO Part 5: Application Instructions**

After award amounts are communicated, applicants will be asked to submit their application for funding. The application includes the work plan and budget and will be due by October 23, 2026, at 4:30 p.m. Central Time.

### **Section 1: Organization and Applicant Information**

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

### **Section 2: Project Information**

This section requests contact information for the organization, including the Authorized Organization Representative (AOR).

This person is often the CEO of the organization and must have the authority to enter into a contract with the State. An additional program contact is also advised.

### **Section 3: Project Narrative and Workplan**

#### **Population Served**

Please describe the services your organization provides to uninsured youth under age 21.

#### **Work Plan Narrative**

Describe the activities that will be funded with this grant. (3 – 5 sentences)

Grantees will be required to report progress of activities and accomplishments on a semi-annual basis during the grant period.

### **Section 4: Budget**

#### **Budget Line Items**

The budget section asks for the total amount you will spend in each budget category.

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

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### Budget Narrative

The budget narrative question asks you to describe how the funds will be used. The narrative should state what the funds will be used for and why and how you calculated the total amount of the category.

For example, if you are supporting the time of a mental health practitioner, in the budget narrative question you would enter something like: "We will support a .25 FTE clinical psychologist who will see uninsured patients under age 21. Annual salary is \$98,000. FTE .25 x 98,000 = \$24,500.

### Budget Categories

- Salaries: Salaries should include the costs of personnel who work directly for the applicant and are paid a salary or wage directly from the applicant organization. Salaries can be calculated and described in the Budget Narrative as an hourly wage with total hours estimated to be spent on the project, or an annual salary with the estimated percentage of the total FTE.
- Fringe: This category includes share of pay roll tax, health insurance costs, Medicare/Medicaid, etc. for employees billed to this grant under the "salaries" category. If the applicant has expenses in this category, they should explain how they were calculated in the Budget Narrative. This is often calculated at a percentage of salary. Example, \$50,000 x .25% fringe = \$12,500.
- Travel: This category includes travel expenses necessary to complete the grant project.
- Supplies: This category includes supplies needed specifically for the grant project. Some pieces of equipment are classified as supplies. If the equipment costs less than \$10,000, it is considered a supply cost.
- Equipment/Capital: This category includes funding used to purchase equipment or to make capital improvements necessary to complete the grant project. Equipment has a value of \$10,000 or over. Items below \$10,000 are considered supplies.
- Contracted: This category includes expenses for individuals or organizations the applicant will contract with to complete the project, including providers, facilitators and trainers.
- Other expenses: Use the "other" categories to enter expenses that do not fit in the rest of the budget categories listed above.

**All costs incurred in responding to this NOGO will be borne by the applicant.**

## **NOGO Part 6: Attachments**

- Attachment A: Sample Progress and Financial Reports

## Attachment A: Sample Progress and Financial Reports

### Semi-Annual Progress Report:

- Provide the total number of uninsured patients under the age of 21 served in the six-month reporting period.
- Please describe the progress on work plan activities as written in the work plan narrative from your application.
- Please describe the expenses you are submitting and which activities they apply to from your work plan.
- Do you need any technical assistance?

### Financial Report:

- Submit documentation for costs invoiced according to budget along with proof of payment.

### Final Progress Report:

- Provide the total number of uninsured patients under the age of 21 served in the six-month reporting period.
- Please describe the progress on work plan activities as written in the work plan narrative from your application.
- Please describe the expenses you are submitting and which activities they apply to from your work plan.
- Over the past year, what did your organization see with regards to changes in insurance coverage for your patients?
- At the end of the grant period, do you have any unused supplies totaling \$5,000 or more that were purchased with grant funds? If you have remaining supplies over \$5,000, what do you plan to do with the remaining supplies after the grant?

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## Link References

- [Mental Health Safety Net Grant Program - ORHPC Grants and Funding - MN Dept. of Health \(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#mhsn\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#mhsn)
- [Minnesota Statute 145.929 \(https://www.revisor.mn.gov/statutes/cite/145.929\)](https://www.revisor.mn.gov/statutes/cite/145.929)
- [Minnesota Statute section 245.62 \(https://www.revisor.mn.gov/statutes/2017/cite/245.62\)](https://www.revisor.mn.gov/statutes/2017/cite/245.62)
- [Minnesota Statute section 62Q.19 \(https://www.revisor.mn.gov/statutes/cite/62Q.19\)](https://www.revisor.mn.gov/statutes/cite/62Q.19)
- [Dental Safety Net Grant Program \(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#dsn\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#dsn)
- [Mental Health Safety Net Grant Program \(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#mhsn\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#mhsn)
- [Hospital Safety Net Grant Program \(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#hsn\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants#hsn)
- [Join the Teams meeting \(https://teams.microsoft.com/meet/28041188183743?p=coVBOorXLARTjYdbr0L\)](https://teams.microsoft.com/meet/28041188183743?p=coVBOorXLARTjYdbr0L)
- [MDH Grant Resources \(https://www.health.mn.gov/about/grants/resources.html\)](https://www.health.mn.gov/about/grants/resources.html)
- [Minn. Stat. § 16B.97 \(https://www.revisor.mn.gov/statutes/?id=16B.97\)](https://www.revisor.mn.gov/statutes/?id=16B.97)
- [Policy 08-10 on Grant Monitoring \(PDF\) \(https://mn.gov/grants/assets/POL\\_08-10\\_GrantMonitoring\\_2016-12-02\\_tcm1093-749648.pdf\)](https://mn.gov/grants/assets/POL_08-10_GrantMonitoring_2016-12-02_tcm1093-749648.pdf)
- [State Policy 08-08 on Grant Payments \(PDF\) \(https://mn.gov/grants/assets/POL\\_08-08\\_GrantPayments\\_2021-04-12\\_tcm1093-749646.pdf\)](https://mn.gov/grants/assets/POL_08-08_GrantPayments_2021-04-12_tcm1093-749646.pdf)
- [Minn. Stat. § 363A \(https://www.revisor.mn.gov/statutes/cite/363A\)](https://www.revisor.mn.gov/statutes/cite/363A)
- [Minn. Stat. § 363A.02 \(https://www.revisor.mn.gov/statutes/cite/363A.02\)](https://www.revisor.mn.gov/statutes/cite/363A.02)
- [Minnesota Department of Human Rights \(https://mn.gov/mdhr/\)](https://mn.gov/mdhr/)
- [Minn. Rules, part 5000.3550 \(https://www.revisor.mn.gov/rules/5000.3550/\)](https://www.revisor.mn.gov/rules/5000.3550/)
- [Minn. Stat. § 16B.98, subd. 8 \(https://www.revisor.mn.gov/statutes/?id=16B.98\)](https://www.revisor.mn.gov/statutes/?id=16B.98)
- [Minn. Stat. § 16B.98 \(https://www.revisor.mn.gov/statutes/?id=16B.98\)](https://www.revisor.mn.gov/statutes/?id=16B.98)
- [Office of Grants Management's Policy 08-01, "Conflict of Interest Policy for State Grant-Making." \(PDF\) \(https://mn.gov/grants/assets/POL\\_08-01\\_ConflictOfInterestforStateGrantMaking\\_2026-01-01\\_tcm1093-749639.pdf\)](https://mn.gov/grants/assets/POL_08-01_ConflictOfInterestforStateGrantMaking_2026-01-01_tcm1093-749639.pdf)
- [Applicant Conflict of Interest Disclosure form \(PDF\) \(https://www.health.state.mn.us/about/grants/coiapplicant.pdf\)](https://www.health.state.mn.us/about/grants/coiapplicant.pdf)
- [Minn. Stat. § 13.599 \(https://www.revisor.mn.gov/statutes/cite/13.599\)](https://www.revisor.mn.gov/statutes/cite/13.599)
- [Minn. Stat. § 13.37 \(https://www.revisor.mn.gov/statutes/cite/13.37\)](https://www.revisor.mn.gov/statutes/cite/13.37)
- [Minnesota Government Data Practices Act \(Ch. 13 MN Statutes\) \(https://www.revisor.mn.gov/statutes/cite/13/full\)](https://www.revisor.mn.gov/statutes/cite/13/full)
- [ORHPC Online Grants Portal \(https://www.grantinterface.com/Home/Logon?urlkey=mdh\)](https://www.grantinterface.com/Home/Logon?urlkey=mdh)
- [ORHPC Grant Guide \(PDF\) \(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/docs/2022grantguide.pdf\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/docs/2022grantguide.pdf)
- [Qualifying Data Attestation Form \(PDF\) \(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/docs/mhsnattestation.pdf\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/docs/mhsnattestation.pdf)

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- [Budget Worksheet Form \(Excel\)  
\(https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/excel/samplebudget.xlsx\)](https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/excel/samplebudget.xlsx)