



# **FY2024 Primary Care Residency Expansion Grant Program**

GRANT REQUEST FOR PROPOSAL (RFP)

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09/18/2023

To obtain this information in a different format, call: 651-201-3838.

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## RFP Part 1: Overview

### 1.1 General Information

- **Announcement Title:** FY2024 Primary Care Residency Expansion Grant Program
- **Minnesota Department of Health (MDH) Program Website:**  
<https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/index.html#pcres>
- **Application Deadline:** 11:59 p.m., Friday, November 3, 2023

### 1.2 Program Description

In 2015, the Minnesota Legislature enacted [Minnesota Statutes Section 144.1506](#), authorizing the Commissioner of Health to award grants to support new primary care residency positions. The grant program assists existing or proposed primary care residency programs in Minnesota by funding costs associated with creating new residency programs and training eligible residents in newly created slots. Funds will be awarded after a competitive review process.

### 1.3 Funding and Project Dates

#### Funding

##### Total Available Funding

The Minnesota Legislature has appropriated \$1,900,000 in grant funds for fiscal year 2024.

##### Distribution of Funding

Eligible programs may receive up to \$75,000 for primary care residency planning projects. For implementing a new primary care residency slot over a three-year residency period, the maximum award will be \$150,000 in year 1, \$100,000 in year 2, and \$50,000 in year 3. For eligible residency programs longer than three years, training grants may be awarded for the duration of the residency, not exceeding an average of \$100,000 per residency slot per year.

Eligible applicants must agree to maintain an expanded number of residents and verify the number each year to continue to receive funds.

MDH may award grants to support up to six family medicine, general internal medicine, or general pediatrics residents; five psychiatry residents; two geriatrics residents; and two general surgery residents. If insufficient applications are received from any eligible specialty, funds may be redistributed to applications from other eligible specialties. Due to funding, MDH may award fewer grants in each specialty than the maximum number allowed by the legislation.

Eligible applicants may apply for funding for more than one new residency slot, but due to the competitive nature of the grant, may not receive funding for all new slots. Note that if applying

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for residency slots in more than one specialty, a separate application should be submitted for each specialty.

Funding will be allocated through a competitive process. If selected, you may only incur eligible expenditures when the grant agreement is fully executed and the grant has reached its effective date.

Funding	Estimate
Estimated Amount to Grant	\$1,900,000
Estimated Number of Awards	6
Estimated Award Maximum	\$400,000
Estimated Award Minimum	\$75,000

### Match Requirement

There is no match requirement.

### Project Dates

Application due to MDH:	November 3, 2023
Grant distribution announcement:	Late December 2023
Grant Agreements begin:	March 1, 2024

## 1.4 Eligible Applicants

Eligible applicants are programs, sponsors, and potential sponsors of primary care residency positions that fulfill all the following criteria:

- Located in Minnesota and train, or propose to train, medical residents in Minnesota.
- Train, or propose to train, medical residents in the following primary care specialties:
  - Family medicine,
  - General internal medicine,
  - General pediatrics,
  - Psychiatry (including child psychiatry fellowships),
  - Geriatrics, or
  - General surgery.
- Demonstrate current accreditation by and compliance with the Institutional and Program Requirements for Graduate Medical Education in the specialties listed above of the Accreditation Council for Graduate Medical Education (ACGME), or submit a credible plan to obtain accreditation.

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- Propose to plan or implement one or more new primary care residency slots.
- Applicants that currently train residents must document the baseline number of residents in the eligible specialty and agree to maintain that baseline number of residents as well as the new resident(s) to be supported with grant funding.
- Agree to verify the number of residents in the program each year to continue to receive funds.

### Collaboration

Collaboration between entities is welcome but not required.

## 1.5 Questions and Answers

All questions regarding this RFP must be submitted by email to Ann Linde at [ann.linde@state.mn.us](mailto:ann.linde@state.mn.us). All answers will be posted within five business days at <https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/index.html#pcres>.

Please submit questions no later than 4:30 p.m. Central Time on October 18, 2023.

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

## RFP Part 2: Program Details

### 2.1 Priorities

#### Health Equity Priorities

It is the policy of the State of Minnesota to ensure fairness, precision, equity and consistency in competitive grant awards. This includes implementing diversity and inclusion in grant-making. [The Policy on Rating Criteria for Competitive Grant Review](#) establishes the expectation that grant programs intentionally identify how the grant serves diverse populations, especially populations experiencing inequities and/or disparities.

The Primary Care Residency Expansion Grant program was enacted to address a shortage of primary care residency training slots in Minnesota, which is contributing to a shortage of primary care physicians in many areas of the state.

The program will serve all Minnesotans in need of health care by ensuring that the state is increasing the number of physicians in each of the eligible primary care provider fields (see section 1.4).

Creating new primary care residency slots is expected to increase health care access for underserved populations across Minnesota, including communities experiencing inequities based on race/ethnicity, age, gender, sexual orientation, disability status, income, education, and geography.

Grant outcomes will include:

- Supporting the expansion of Minnesota's primary care physician workforce.
- Introducing primary care physicians to underserved populations while in residency, fostering their interest in and commitment to serving those most in need.

#### Other Competitive Priorities

Eligible applicants are encouraged to develop or expand primary care residency programs in rural Minnesota. Priority will be given to programs that include rural training rotations.

Priority will be given to applications that demonstrate placement of graduates in rural or underserved communities.

Priority will be given to applications that demonstrate how the curriculum prepares physicians to address health inequities and work cross-culturally.

Programs are encouraged, but not required, to support residency training for Immigrant International Medical Graduates (IIMGs). Additional funding may be available for residency slots filled by IIMGs. IIMGs must have resided in Minnesota for at least two years, be certified by the Educational Commission for Foreign Medical Graduates, and commit to providing

primary care in a rural or underserved area of Minnesota for at least five years following residency.

## 2.2 Eligible Projects

Grant funds may be used for:

- Planning related to establishing an accredited primary care residency program;
- Obtaining accreditation by the Accreditation Council for Graduate Medical Education or another national body that accredits residency programs;
- Establishing new residency programs or new resident training slots;
- Recruitment, training, and retention of new primary care residents and faculty;
- Travel and lodging for new primary care residents;
- Salary and fringe for new primary care residents, as well as faculty and preceptors related to new residency slots;
- Training site improvements, fees, equipment, and supplies required for new primary care resident training slots; and
- Supporting clinical education in which primary care residents are part of a primary care team model.

### Ineligible Expenses

Ineligible expenses include but are not limited to:

- Fundraising.
- Taxes, except sales tax on goods and services.
- Lobbyists, political contributions.
- Bad debts, late payment fees, finance charges, or contingency funds.
- Supplanting existing program funds.
- Administrative or indirect costs not directly related to the training program.

## 2.3 Grant Management Responsibilities

### Grant Agreement

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. Grantee should read the grant agreement, sign, and once signed, comply with all conditions of the grant agreement.

No work on grant activities can begin until a fully executed grant agreement is in place and the State's Authorized Representative has notified the Grantee that work may start.

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

## Accountability and Reporting Requirements

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

The reporting schedule will be quarterly.

## Grant Monitoring

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

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

## Technical Assistance

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

For assistance, contact Ann Linde at [ann.linde@state.mn.us](mailto:ann.linde@state.mn.us).

## Grant Payments

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

The invoicing and payment schedule is as follows:

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

## 2.4 Grant Provisions

### Contracting and Bidding Requirements

**(a) Municipalities** A grantee that is a municipality, defined as a county, town, city, school district or other municipal corporation or political subdivision of the state



authorized by law to enter into contracts is subject to the contracting requirements set forth under [Minn. Stat. § 471.345](#). Projects that involve construction work are subject to the applicable prevailing wage laws, including those under [Minn. Stat. § 177.41](#), et. seq.

**(b) Non-municipalities** Grantees that are not municipalities must adhere to the following standards in the event that duties assigned to the Grantee are to be subcontracted out to a third party:

- i. Any services or materials that are expected to cost \$100,000 or more must undergo a formal notice and bidding process consistent with the standards set forth under Minnesota Statutes 16B.
- ii. Services or materials that are expected to cost between \$25,000 and \$99,999 must be competitively awarded based on a minimum of three (3) verbal quotes or bids.
- iii. Services or materials that are expected to cost between \$10,000 and \$24,999 must be competitively awarded based on a minimum of two (2) verbal quotes or bids or awarded to a targeted vendor.
- iv. The grantee must take all necessary affirmative steps to assure that targeted vendors from businesses with active certifications through these entities are used when possible:
  - Minnesota Department of Administration’s Certified Targeted Group, Economically Disadvantaged and Veteran-Owned Vendor List (<http://www.mmd.admin.state.mn.us/process/search>);
  - Metropolitan Council’s Targeted Vendor list: Minnesota Unified Certification Program (<https://mnuccp.metc.state.mn.us/>) or
  - Small Business Certification Program through Hennepin County, Ramsey County, and City of St. Paul: Central Certification Program (<https://www.stpaul.gov/departments/human-rights-equal-economic-opportunity/contract-compliance-business-development-9>).
- v. The grantee must maintain written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts.
- vi. The grantee must maintain support documentation of the purchasing or bidding process utilized to contract services in their financial records, including support documentation justifying a single/sole source bid, if applicable.
- vii. Notwithstanding (i) - (iv) above, State may waive bidding process requirements when:
  - Vendors included in response to competitive grant request for proposal process were approved and incorporated as an approved work plan for the grant or

- There is only one legitimate or practical source for such materials or services and that grantee has established a fair and reasonable price.
- viii. Projects that include construction work of \$25,000 or more, are subject to applicable prevailing wage laws, including those under Minnesota Statutes 177.41 through 177.44.
- ix. Grantee must not contract with vendors who are suspended or debarred in MN: The list of debarred vendors is available at:  
<http://www.mmd.admin.state.mn.us/debarredreport.asp>.

### Conflicts of Interest

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

**Applicants must complete the Applicant Conflict of Interest Disclosure form as part of the online application and submit it as part of the completed application.** Failure to complete and submit this form will result in disqualification from the review process.

Organizational conflicts of interest occur when:

- A grantee or applicant is unable or potentially unable to render impartial assistance or advice.
- A grantee’s or applicant’s objectivity in performing the grant work is or might be otherwise impaired.
- A grantee or applicant has an unfair competitive advantage.

Individual conflicts of interest occur when:

- An applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH’s time, services, facilities, equipment, supplies, prestige, or influence.
- An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.
- An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

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

## Public Data and Trade Secret Materials

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

Once the applications are opened, the name and address of each applicant and the amount requested is public. All other data in an application is private or nonpublic data until completion of the evaluation process, which is defined by statute as when MDH has completed negotiating the grant agreement with the selected applicant.

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

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

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

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

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

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

## Audits

Per [Minn. Stat. § 16B.98](#), subd. 8, the grantee's books, records, documents, and accounting procedures and practices of the grantee or other party that are relevant to the grant or transaction are subject to examination by the granting agency and either the legislative auditor or the state auditor, as appropriate. This requirement will last for a minimum of six years from the grant agreement end date, receipt, and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later.

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

The grantee agrees not to discriminate against any employee or applicant for employment because of race, color, creed, religion, national origin, sex, marital status, status in regard to public assistance, membership or activity in a local commission, disability, sexual orientation, or age in regard to any position for which the employee or applicant for employment is qualified. [Minn. Stat. § 363A.02](#). The grantee agrees to take affirmative steps to employ, advance in employment, upgrade, train, and recruit minority persons, women, and persons with disabilities.

The grantee must not discriminate against any employee or applicant for employment because of physical or mental disability in regard to any position for which the employee or applicant for employment is qualified. The grantee agrees to take affirmative action to employ, advance in employment, and otherwise treat qualified disabled persons without discrimination based upon their physical or mental disability in all employment practices such as the following: employment, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Minn. Rules, part [5000.3550](#).

The grantee agrees to comply with the rules and relevant orders of the Minnesota Department of Human Rights issued pursuant to the Minnesota Human Rights Act.

## 2.5 Review and Selection Process

### Review Process

Funding will be allocated through a competitive process with review by a committee representing content and community specialists. The review committee will evaluate all eligible and complete applications received by the deadline.

MDH will review all committee recommendations and is responsible for award decisions. **The award decisions of MDH are final and not subject to appeal.** Additionally:

- MDH reserves the right to withhold the distribution of funds in cases where proposals submitted do not meet the necessary criteria.
- The RFP does not obligate MDH to award a grant agreement or complete the project, and MDH reserves the right to cancel this RFP if it is considered to be in its best interest.
- MDH reserves the right to waive minor irregularities or request additional information to further clarify or validate information submitted in the application, provided the

application, as submitted, substantially complies with the requirements of this RFP. There is, however, no guarantee MDH will look for information or clarification outside of the submitted written application. Therefore, it is important that all applicants ensure that all sections of their application are complete to avoid the possibility of failing an evaluation phase or having their score reduced for lack of information.

### **Selection Criteria and Weight**

The review committee will review each application on a 100-point scale. A standardized scoring system will be used to determine the extent to which the applicant meets the evaluation criteria.

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

### **Grantee Past Performance and Due Diligence Review Process**

- It is the policy of the State of Minnesota to consider a grant applicant's past performance before awarding subsequent grants to them.
- State policy requires states to conduct a financial review prior to a grant award made of \$25,000 and higher to a nonprofit organization, in order to comply with [Policy on the Financial Review of Nongovernmental Organizations](#).

### **Notification**

MDH anticipates notifying all applicants via email of funding decisions in late December 2023.

## RFP Part 3: Application and Submission Instructions

### 3.1 Application Deadline

**All applications must be received by MDH no later than 11:59 p.m. Central Time, on Friday, November 3.**

**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.

### 3.2 Application Submission Instructions

ORHPC requires application submissions to be made through an online [Grants Portal](#).

- Existing users: If your organization has had a grant with ORHPC, and you already have a user account, please enter your credentials and log in. If you forgot your password, please use the "Forgot your Password?" link to reset your password.
- If you think that someone at your organization has already registered your organization in the system, do not create a new account. Please contact our office to receive a username and password for the existing account.
- 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 login credentials.
- To add collaborators, such as a fiscal officer, to the application, follow the instructions provided in the [ORHPC Grant Guide](#) on our forms page.

Once in the system, click on the link "apply" located on the upper tool bar on the homepage. You will be redirected to a list of open applications in the system; select the appropriate program and click "Apply."

If you have any questions, please contact Ann Linde at [ann.linde@state.mn.us](mailto:ann.linde@state.mn.us).

### 3.3 Application Instructions

You must submit the following in order for the application to be considered complete. The online application will include:

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

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

#### **Section 2: Contact Information**

This section requests contact information for the organization. All applicants must identify the Authorized Organization Representative (AOR). This person is often the CEO of the organization

and must have the authority to enter a contract with the State. An additional program contact is also advised.

### Section 3: Program Narrative

The online form will ask a series of questions about the applicant organization and proposed program model.

- **New or Existing Residency Program**
  - Indicate whether you are proposing to establish a new primary care residency program or create and maintain at least one new primary care residency slot in an existing program.
- **Program Description (5000 characters)**
  - Provide a summary of your program, including the history, location, staff and faculty, administrative structure, organizational partnerships, and budget. For planning grants, the description may be of the institution or division that will house the new residency program.
- **Program Focus (5000 characters)**
  - Describe the program’s focus or emphasis while training residents, including any current or planned training and rotation sites, health equity and cross-cultural training, primary care team-based training, populations served – including rural and underserved populations, and unique characteristics.
- **Recruitment (5000 characters)**
  - Describe recruitment and selection efforts, including recruitment and selection of international medical graduates; resident match outcomes from recent years; graduation rates; and plans to fill all available residency slots.
- **Program Sustainability (5000 characters)**
  - Describe the program’s plan for sustaining the new residency slot(s) beyond the grant period. Include any relevant research or analysis of the future demand for additional physicians from the program’s specialty.
- **Rural and Underserved Communities (5000 characters)**
  - Describe how your program provides, or will provide, training opportunities for residents in rural and underserved communities. Describe your program’s track record of placing graduates in rural and underserved communities.
- **Baseline Number of Residents (5000 characters)**
  - State a baseline number of residents for the upcoming three years, by year. Include a detailed description of the number of residents and graduates in the previous five years, or maximum years available if fewer than five years. Include a clear description of any recent reductions in the number of residents or any

existing plans to add residents. Over the three years of the grant, the baseline number of residents should be maintained. The baseline number does *not* include the new, grant-funded residency slots.

- **New Residency Slots by Specialty**
  - Indicate the number of new grant-funded residency slots, above the baseline number, proposed. Indicate the eligible specialty (family medicine, general internal medicine, general pediatrics, psychiatry, geriatrics, and general surgery). Note that a separate application should be submitted for each specialty area if applying in more than one specialty.
- **Length of Training**
  - Indicate the length of residency training for each of your proposed residency slots (between two and four years). If selected for grant funding, the length of the contract will reflect the length of the training program, and the maximum award will not exceed \$100,000 per year.
- **Capacity to Train New Residents** (5000 characters)
  - Include a description of the program’s ACGME capacity to train new residents, or a plan to obtain adequate capacity.

#### Section 4: Budget Narrative

Provide details of the proposed budget for each year. For each budget item, provide a rationale and details of how the costs were calculated. Also include detail on any funding sources besides these grant funds that will be used to maintain the new resident(s) during the grant period.

- **Salary:** Describe all salaries to be paid to residents, faculty, and/or preceptors using grant funds. Include a description of the percentage of salary to be paid using grant funds for each individual.
- **Fringe:** Describe all fringe benefits to be paid to residents, faculty, and/or preceptors using grant funds. Include a description of the percentage of fringe to be paid using grant funds for each individual.
- **Travel and Lodging:** Describe any proposed travel and/or lodging for new residents as it relates to the direct operation of the program. Allowed and approved travel expenses will be reimbursed in no greater amount than as provided in the current Minnesota Management and Budget [Commissioner’s Plan](#) or at the grantee’s established rate, whichever is lower, at the time travel occurred.
- **Supplies:** Include a description of any supplies necessary for the new primary care resident training slots.
- **Contracted Services:** Include any contracted services, such as costs associated with training sites, on this line.
- **Equipment and Capital Improvements:** Include any equipment or training site improvement costs required for new primary care resident training slots.



- **Other Expenses:** Whenever possible, include proposed expenditures in the categories listed above. If it is necessary to include expenditures in this general category, include a detailed description of the activities as they relate to the direct operation of the program. This category may include costs to obtain accreditation and other eligible expenses as detailed in section 2.2 of this RFP.

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

## Section 5: Required Attachments

- **Due Diligence Review and Financial Questionnaire.** All applicants are required to complete and submit this form, which is available on the Office of Rural Health and Primary Care website.
- **Conflict of Interest Disclosure:** This form allows applicants to disclose any actual, perceived, or potential individual or organizational conflicts of interest. Applicants will complete this form as part of the online application.
- **Program Financial Statement.** Applicants must include the program's most current financial statement. This can be a recent 990 form, an audit, a balance sheet, or an income statement that shows annual revenue and expenses. Attached financial documents must be specific to the residency program, not documentation of a larger organization.
- **Proof of Accreditation.** Applications must include documentation of current accreditation by ACGME or another national body that accredits residency programs, or a detailed plan to obtain accreditation.

Applications must include all required application materials, including attachments. Do not provide any materials that are not requested in this RFP, as such materials will not be considered nor evaluated. **MDH reserves the right to reject any application that does not meet these requirements.**

By submitting an application, each applicant warrants that the information provided is true, correct, and reliable for purposes of evaluation for potential grant award. The submission of inaccurate or misleading information may be grounds for disqualification from the award, as well as subject the applicant to suspension or debarment proceedings and other remedies available by law.

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

## RFP Part 4: Application Evaluation Criteria

A numerical scoring system will be used to evaluate eligible applications. Scores will be used to develop final recommendations. Applicants are encouraged to evaluate their own application according to these criteria before submitting their application.

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

- **10 points: Program Description**
  - Does the application clearly and thoroughly describe the program’s history, location, staff and faculty, administrative structure, organizational partnerships, and budget?
- **20 points: Program Focus**
  - Does the application clearly and thoroughly describe the program’s focus or emphasis while training residents?
  - What are the unique characteristics and strengths of the program (or proposed program)?
  - For both questions, reviewers will consider rural rotation sites, health equity and cross-cultural training, primary care team-based training, and how the program serves rural and underserved populations.
- **10 points: Recruitment and Capacity**
  - Does the application describe effective recruitment and selection efforts and plans to fill all residency slots?
  - Does the program (or institution, in the case of planning grants) have strong graduation rates and resident match outcomes from recent years?
  - Does the description adequately define the baseline number of residents for the upcoming three years?
  - Has the applicant demonstrated the capability to train additional residents?
- **20 points: Rural and Underserved Communities**
  - Does the program provide training opportunities for residents in rural and underserved communities, or have a clear and feasible plan for doing so?
  - Does the program (or institution, in the case of planning grants) have a strong track record of placing graduates in rural and underserved communities?
- **20 points: Program Sustainability**
  - Does the program have a clear, feasible plan for sustaining the new residency slot(s) beyond the grant period?
  - Is there sufficient evidence that the new slot(s) will be sustained, including any relevant research or analysis of the future demand for additional physicians from the program’s specialty?
- **20 points: Budget**

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- Is the proposed budget clear? Does the budget narrative give adequate detail about how funds will be used?
- Is the budget reasonable?