

RFA # 20244 / Grants Gateway # DOH01-SHCFT4-2023

New York State Department of Health
Office of Primary Care and Health Systems Management

Request for Applications

Statewide Health Care Facility Transformation Program IV

KEY DATES:

Release Date:	January 9, 2024
Questions Due:	February 20, 2024
Questions, Answers and Updates Posted (on or about):	March 5, 2024
Applications Due:	March 26, 2024 by 4:00 PM ET

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I. Introduction

The New York State Department of Health (NYSDOH) and the Dormitory Authority of the State of New York (DASNY) announce the availability of funds under the Statewide Health Care Facility Transformation Program IV (SHCFTP IV), as established pursuant to Section 2825-g of the Public Health Law (PHL), accompanying capital appropriations, and Section 1680-r of the Public Authorities Law (PAL), to provide grants in support of capital projects and debt retirement and restructuring, working capital or other non-capital projects directly related to a capital project that facilitate furthering transformational goals, including, but not limited to, transforming, redesigning, and strengthening quality health care services in alignment with statewide and regional health care needs and in the ongoing pandemic response, or other activities intended to build innovative, patient-centered models of care, to increase access to care, to improve the quality of care and to ensure financial sustainability of health care providers. Grants shall not be made to support general, day-to-day operating costs.

Priority will be given to Eligible Applicants in severe financial distress or that demonstrate how the proposed use of the grant will strengthen their financial sustainability and protect continued access to critical health services in their community or communities.

Projects shall not receive awards under both this RFA and the Kings County Health Care Transformation Program (PHL §2825-a) or the Oneida County Health Care Transformation Program (PHL §2825-b). An Eligible Applicant may apply for funding under this RFA for a project(s) that is separate, distinct and is not funded in whole or in part through either the Kings County Health Care Transformation Program or the Oneida County Health Care Transformation Program.

Applicants which have also applied for awards under the “Nonprofit Infrastructure Capital Investment Program,” administered by the Dormitory Authority of the State of New York, should be advised that projects may not be funded by overlapping sources of State funding.

To receive funding, the Eligible Applicant must demonstrate how the proposed use of the grant will transform, redesign, and strengthen access to quality health care services in communities. Eligible Applicants should describe:

- i. How the Eligible Project will maintain or improve the long-term financial sustainability of the Eligible Applicant.
- ii. How the Eligible Project will result in improved quality of care, patient outcomes and patient experience, for the populations in the community or communities served by the Eligible Applicant.
- iii. Steps to be taken to integrate, preserve or expand the ongoing availability of essential health care services to the people of the community or communities served by the Eligible Applicant.
- iv. The relationship of the Eligible Project to an identified community need and steps taken to engage the community in the development of the Eligible Project.
- v. How the Eligible Project will advance health equity for populations in the community or communities served by the Eligible Applicant.
- vi. The extent to which the Eligible Project will benefit Medicaid beneficiaries, Medicare beneficiaries and uninsured/underinsured individuals.

- vii. The extent to which the Eligible Applicant has limited access to alternative financing.

Applicants are hereby advised that, in accordance with Public Health Law 2825-g and Chapter 54 of the Laws of 2022, awards made under this RFA are determined on a non-competitive, discretionary basis. Funding will be awarded at the discretion of the Commissioner of Health and approval of the Director of the Division of the Budget for purposes described in this RFA. Without limitation to this authorization, the Commissioner of Health may consult with the Director of the Division of the Budget, DASNY, NYSDOH and DASNY professional staff, and any other internal or external experts or local health care constituents as appropriate from time to time and/or at any time in the evaluation of applications received pursuant to this RFA. The decision to award, or not to award, or to award a grant at a funding level that is less than the amount requested by the applicant, is discretionary and cannot be appealed.

As these awards are discretionary, there is no right of appeal and the decision of the Commissioner of Health, and the approval of the Director of the Division of the Budget is final. As such, applicants are advised to put forward their best efforts in thoroughly completing and fulfilling all the requirements of the RFA.

The decision not to fund an application will be communicated by letter. Based on the number of applicants, NYSDOH shall have the sole discretion of whether or not to provide an opportunity for non-successful applicants to request a debriefing to be conducted after the announcement of awards. Comparisons with other grant applications will not be made during a debriefing.

NYSDOH's determination of applicable terms and conditions of award or a denial of a request to change the terms and conditions is discretionary and not subject to appeal.

II. Who May Apply

Each “Eligible Applicant” must meet all the following criteria to be eligible to receive grant funding under this RFA:

- (a) Eligible Applicants must be a legally existing organization and capable of entering into a binding Master Grant Contract (MGC) with NYSDOH.
- (b) Eligible Applicants must be one of the following types of provider organizations established in accordance with PHL Section 2825-g.:
 - General hospitals licensed under Article 28 of the PHL;
 - Residential health care facilities licensed under Article 28 of the PHL;
 - Adult care facilities licensed under title two of Article 7 of the Social Services Law (SSL);
 - Assisted living programs approved by NYSDOH pursuant to section 461-1 of the SSL;
 - Children's residential treatment facilities licensed pursuant to Article 31 of the Mental Hygiene Law (MHL); and
 - Residential facilities licensed or granted an operating certificate under Article 16 of the MHL.

- Community-based health care providers which, in accordance with statute and for purposes of this RFA, are defined as:
 - Diagnostic and treatment centers certified or licensed under Article 28 of the PHL;
 - Home care providers certified or licensed under Article 36 of the PHL;
 - Hospices licensed or granted an operating certificate under Article 40 of the PHL;
 - Primary care providers with a New York State Medical License; and
 - Independent practice associations or organizations with a valid New York Department of State Identification Number.
- Community-based behavioral health care providers which, in accordance with statute and for purposes of this RFA, are defined as:
 - Mental health clinics licensed or granted an operating certificate under Article 31 of the MHL;
 - Alcohol and substance use disorder treatment clinics licensed or granted an operating certificate under Article 32 of the MHL;
 - Day program facilities licensed or granted an operating certificate under Article 16 of the MHL;
 - Clinics licensed or granted an operating certificate under Article 16 of the MHL; and
 - Community-based programs funded under the Office of Mental Health, the Office of Addiction Services and Supports, the Office for People with Developmental Disabilities, or through local governmental units as defined under Article 41 of the MHL.

and,

- (c) An Eligible Applicant must be currently certified and/or licensed under one or more provider organizations as established in accordance with PHL Section 2825-g and the Eligible Applicant must submit all current certifications and/or licensures related to the project at the time of application submission for the project to be deemed an Eligible Project.

Provide proof that the applicant meets the minimum eligibility requirements under Section II. Who May Apply. Proof of subsection (b). eligibility includes an uploaded copy of a New York State Operating Certificate for an Article 7, 16, 28, 31, 32, 36, 40 or 41 provider organization, or an uploaded copy of a New York State Medical License for a primary care provider or a filing receipt or copy of Articles of Organization for an independent practice association or organization. Provide proof of all other current certifications and/or licensure related to a project. All documents must be combined into a single PDF no larger than 10MB and uploaded as Attachment 6 via the Grants Gateway in the Pre-Submission Uploads section of the online application.

- (d) Eligible Applicants must be prequalified in the New York State Grants Gateway or Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the “Key Dates” set forth on the Cover Page of this RFA (Please see Section IV.M for additional information).

IMPORTANT NOTE: Due to system conversion ([Transition to SFS](#)) expected on January 16th, 2024, Applicants that are not fully prequalified in the NYS Grants Gateway by close of business (COB) January 9th, 2024, will need to prequalify in the NYS Statewide Financial System (SFS).

Additionally, if an applicant’s vault expires prior to application submission, applicant will need to prequalify in SFS. The first day that the SFS prequalification modules will be available is January 16th, 2024. Please see Section IV.M.4 of this RFA for additional information on SFS Prequalification.

Additional Notes:

An Eligible Applicant must be one of the provider organizations listed as an “Eligible Applicant” above. An Eligible Applicant must meet these minimum eligibility requirements at the time the application is submitted. An application must have one Eligible Applicant and the project as proposed in that application must primarily benefit the Eligible Applicant. The proposed project should align with the licensure the applicant is using to demonstrate eligibility for this grant funding.

General hospitals licensed under Article 28 of the PHL are further clarified for purposes of this RFA. The following definitions of passive and active hospital parents are used, and their respective eligibility to apply on behalf of their subsidiary is confirmed.

- A passive hospital parent is not an Eligible Applicant. A passive hospital parent is not legally established by the NYS Public Health and Health Planning Council and is not fully accountable for actions by its subsidiary. For purposes of this RFA, a passive hospital parent is not eligible to apply on behalf of a subsidiary.
- An active hospital parent is legally established by the NYS Public Health and Health Planning Council and is fully accountable for the actions of its subsidiary. For purposes of this RFA, an active hospital parent is an Eligible Applicant and can apply on behalf of a subsidiary.

III. Project Narrative/Work Plan Outcomes

Multiple awards will be made under this RFA. An Eligible Applicant can choose to submit a single application or multiple applications.

Separate applications must be submitted for non-capital projects or debt retirement and restructuring purposes even if they are part of the same overall purpose for which an application for a capital project(s) is also being submitted.

Applicants can submit an application or applications to fund more than one Eligible Project. **It is preferred that applicants submit separate applications for each Eligible Project.** Separate applications will enable the review team to better consider the individual merits of each application and fund individual Eligible Projects. **If an Eligible Applicant submits multiple, separate applications for funding under this RFA, the Eligible Applicant must assign a priority to each application.**

The decision to submit separate applications or one application should be based on whether the Eligible Projects are interdependent. If submitting one application with more than one Eligible Project, the Eligible Projects should be considered interdependent to creating a financially sustainable system of care. If applications are interdependent and the overall Eligible Project cannot be completed unless all are funded, Eligible Applicants should describe this interdependence.

The NYSDOH 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.

A. Eligible Projects

An "Eligible Project" must include Eligible Expenses, as defined herein. Projects shall not receive an award under both this RFA and the Kings County Health Care Transformation Program (PHL §2825-a) or the Oneida County Health Care Transformation Program (PHL §2825-b). An Eligible Applicant may apply for funding under this RFA for a project(s) that is separate, distinct and is not funded in whole or in part through either the Kings County Health Care Transformation Program or the Oneida County Health Care Transformation Program.

An Eligible Applicant must be appropriately certified or licensed to complete all aspects of the proposed project at the time of application. Certificate of Need (CON) approval of the Eligible Project from the NYS Public Health and Health Planning Council (PHHPC) is not needed at the time of application submission.

B. Eligible and Excluded Expenses and Disallowed Costs

Expenditures eligible for funding under SHCFTP IV ("Eligible Expenses") are for capital projects which may include, but are not limited to:

- The planning or design of the acquisition, construction, demolition, replacement, major repair or renovation of a fixed asset or assets, including the preparation and review of plans and specifications including engineering and other services;
- Construction costs;
- Renovation costs;
- Asset acquisitions;
- Equipment costs; and
- Consultants' fees and other expenditures associated with the preparation of Certificate of Need (CON) applications required for the proposed establishment action, construction activity or service expansion (so long as the costs incurred are in connection with original construction and not an ownership transfer).

Expenditures eligible for funding under SHCFTP IV also include debt retirement and restructuring and other non-capital projects. Such expenditures may include:

- Debt restructuring including costs to reduce, retire or refinance long-term liabilities such as mortgages, bank loans, capital leases and other liabilities, payments of debt service for such long-term liabilities and costs for restricting including professional fees, penalties, and interest; and
- Start-up operating expenses directly connected to the Eligible Project for which funding is being sought under this RFA.

Eligible Applicants must include a robust description of the Eligible Project and justification for all expenditures included in the Project Budget as well as a discussion of how the expenditure relates to the Eligible Project.

If Eligible Applicants apply for non-capital debt retirement and restructuring, working capital, and other non-capital projects, a detailed description must be included of how the debt restructuring will enable the Eligible Applicants to conduct specific health care transformation activities aligned with the purpose of SHCFTP IV grant funding.

If applicable to the Eligible Project, it is understood that design plans and specifications are unlikely to be available at this stage of Project development. However, an Eligible Applicant should be able to describe the 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 those costs.

If applicable to the Eligible Project, Eligible Applicants may subcontract components of the scope of work. For those Eligible Applicants that propose subcontracting, if known, the Eligible Applicant is expected to state in their application the specific components to be performed through subcontracts as well as the names of the subcontractors. Grantees will need to name subcontractors prior to reimbursement. Applicants should note that the lead organization (that is, the successful Applicant, as Contractor) will have overall responsibility for all Contract activities, including those performed by subcontractors and will be the primary contact for the NYSDOH. All subcontractors and subcontracts will be required to be approved by the Department of Health. When a subcontract equals or exceeds \$100,000, the subcontractor shall submit a Vendor Responsibility Questionnaire.

Excluded expenses are not eligible for funding under SHCFTP IV. Excluded expenses include:

- General ongoing operating costs applicable to day-to-day operations. General ongoing operating costs that are not eligible for funding under SHCFTP IV include expenses such as routine supplies; utilities; operating lease payments, equipment with a useful life of less than three years; ongoing, routine maintenance costs related to health information technology projects including but not limited to training of end-users or any ‘help-desk’ services or associated costs, costs/services beyond Design, Development, and Implementation and into Operations and maintenance (i.e., the system is operational, supporting health care operations), Software as a Services (SaaS) services post “go-live”, recurring licensing costs, cloud consumption and/or hosting post “go-live”, subscription costs with telehealth vendors, other non-capital startup expenditures, such as data plans, internet connectivity or voice services; and employees’ salaries and benefits, including those of new staff; and
- Costs related to health information technology and/or telehealth that exceed 15 percent of the total Eligible Project funds requested.

Disallowed costs include expenditures identified in the Eligible Project Budget that are Excluded Expenses or are not sufficiently described and/or justified in type or amount by the applicant or are considered to be unrelated to the proposed Eligible Project. Disallowed costs will be excluded from the amount considered as the grant request.

Only expenses determined allowable under the contract budget and work plan and incurred on or after the start date of the contract (expected no earlier than October 1, 2024, may be vouchered for reimbursement. Any obligations assumed by an Eligible Applicant prior to execution of the MGC are assumed at risk.

C. Evaluation Criteria

In determining awards for Eligible Projects, the NYSDOH shall consider criteria including, but not limited to:

1. The extent to which the Eligible Project will maintain or improve the long-term financial sustainability of the Eligible Applicant.
2. The extent to which the Eligible Project impacts improved quality of care, patient outcomes and patient experience, for the population in the community or communities served by the Eligible Applicant.
3. The extent to which the Eligible Project contributes to the integration, preservation, or expansion of essential health care services in the community or communities served by the Eligible Applicant.
4. The relationship between the Eligible Project and an identified community need and the extent to which community engagement has helped shape the Eligible Project.
5. The extent to which the Eligible Project advances health equity for the population in the community or communities served by the Eligible Applicant.
6. The extent to which the Eligible Project benefits Medicaid beneficiaries, Medicare beneficiaries, and uninsured/underinsured individuals.
7. The extent to which the Eligible Applicant has limited access to alternative financing.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health (hereinafter referred to as NYSDOH or the Department), Office of Primary Care and Health Systems Management. Pursuant to PHL Section 2825-g, Statewide Health Care Facility Transformation Program IV grants may be awarded by the Commissioner of NYSDOH and approval of the Director of the Division of the Budget. The Department is responsible for the requirements specified herein and for the evaluation of all applications. *See*, Section V.C. (Review and Award Process).

B. Question and Answer Phase

All substantive questions by Applicants with respect to any aspect of the RFA must be submitted in writing to Megan Prokorym, NYSDOH, Health Care Transformation Group, at the following email address: Statewide4transformation@health.ny.gov. This includes Minority and Women Owned Business Enterprise (M/WBE) questions and questions pertaining to the M/WBE forms. *See*, Section IV.I. (Minority & Women-Owned Business Enterprise (M/WBE) Requirements). Questions of a technical nature related to formatting or other minor details related to preparation of an Application may also be addressed in writing to the email address noted above. Questions are of a technical nature if they are limited to how to prepare your Application (e.g., formatting) rather than relating to the substance of the Application.

To the degree possible, each question submitted by a potential Applicant pursuant to the terms of this RFA should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the Cover Page of this RFA.

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the NYSDOH contact listed on the cover of this RFA.

- <https://grantsmanagement.ny.gov/resources-grant-applicants>
- Grants Gateway Videos: <https://grantsmanagement.ny.gov/videos-grant-applicants>
- Grants Gateway Team Email: grantsgateway@its.ny.gov
Phone: 518-474-5595
Hours: Monday thru Friday 8am to 4pm
(Application Completion, Policy, Prequalification and Registration questions)
- Agate Technical Support Help Desk
Phone: 1-800-820-1890
Hours: Monday thru Friday 8am to 8pm
Email: helpdesk@agatesoftware.com
(After hours support w/user names and lockouts)

Prospective Applicants should note that all responses by the Department to questions submitted with respect to this RFA which result in clarifications of or exceptions to the terms, conditions, and provisions of this RFA and/or the Master Contract for Grants, are to be raised during the Question and Answer Phase. The Applicant must clearly note what exceptions the Applicant is requesting be incorporated should the application result in a funded award. All questions and answers will be published by the Department to ensure equal access and knowledge by all prospective Applicants at https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx by the date specified on the Cover Page of this RFA.

This RFA has been posted on the NYS Grants Gateway website at: https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx and a link provided on the Department's public website at: <https://www.health.ny.gov/funding/>.

All Questions must be received by the date and time specified on the Cover Page of this RFA, under “Key Dates”, opposite the heading “Questions Due”.

All questions submitted by email should state the RFA Title and Number set forth on the Cover Page (RFA# 20244, Statewide Health Care Facility Transformation Program IV) in the subject line of the email.

Questions and answers, as well as any updates, addendums to, and/or other modifications of this RFA, will be posted on these websites. All such questions and answers, updates, addendums to, and other modifications to this RFA will be posted by the date identified on the Cover Page of this RFA under “Key Dates”.

C. Letter of Interest

A Letter of Interest is not requested for this project.

D. Applicant Conference

An Applicant Conference will not be held for this Project by way of a webinar.

E. How to file an application

Applications must be submitted online via the Grants Gateway by the date and time posted on the Cover Page of this RFA under the heading “Key Dates”.

Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Management website at the following web address: <https://grantsmanagement.ny.gov/> and select the “Apply for a Grant” from the Apply & Manage menu. There is also a more detailed “Grants Gateway: Vendor User Guide” available in the documents section under Training & Guidance; For Grant Applicants on this page as well. Training webinars are also provided by the Grants Gateway Team. Dates and times for webinar instruction can be located at the following web address: <https://grantsmanagement.ny.gov/live-webinars>.

To apply for this opportunity (that is, to submit an Application):

1. Log into the [Grants Gateway](#) as either a “Grantee” or “Grantee Contract Signatory”.
2. On the Grants Gateway home page, click the “View Opportunities” button”.
3. Use the search fields to locate an opportunity; search by State agency (NYSDOH) or enter the Grant Opportunity name **Statewide Health Care Facility Transformation Program IV**.
4. Click on “Search” button to initiate the search.
5. Click on the name of the Grant Opportunity from the search results grid and then select the “APPLY FOR GRANT OPPORTUNITY” button located bottom left of the Main page of the Grant Opportunity.

Once the Application is complete, a prospective Applicant is **strongly encouraged** to submit their Application at least **48 hours prior to the Application’s due date** and time specified on the Cover Page of this RFA. This will allow sufficient opportunity for the Applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. **Failure to leave adequate time to address issues identified during this process may jeopardize an Applicant’s ability to submit their Application.** Both NYSDOH and Grants Gateway staff are available to answer an Applicant’s technical questions and provide technical assistance prior to the Application due date and time. Contact information for the Grants Gateway Team is available under Section IV.B. (Question and Answer Phase) of this RFA.

PLEASE NOTE: Although NYSDOH and the Grants Gateway staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time for the submission of an Application, there is no guarantee that they will be resolved in time for the Application to be submitted on time and, therefore, considered for funding.

The Grants Gateway will always notify an Applicant of successful submission of the Applicant’s Application. If a prospective Applicant does not get a successful submission message assigning their Application a unique ID number, it has **NOT** successfully submitted an Application. During the application process, please pay particular attention to the following:

- Not-for-profit Applicants must be prequalified, if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the “Key Dates” set forth on the Cover Page of this RFA. Be sure to maintain prequalification status between funding opportunities. **NOTE:** Three of a not-for-profit’s essential financial documents - the IRS990, its Financial Statement, and its Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit’s prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the roles “Grantee Contract Signatory” or “Grantee System Administrator” can submit an Application on behalf of an Applicant.
- Prior to submission, the Grants Gateway will automatically initiate a global error checking process to protect against an incomplete Application. An Applicant may need to attend to certain parts of the Application prior to being able to submit the Application successfully. An Applicant must be sure to allow time after pressing the submit button to clean up any global errors that may arise. An Applicant can also run the global error check at any time in the application process. (see p.68 of the Grants Gateway: Vendor User Guide).
- Applicants should use numbers, letters, and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also, be aware of the restriction on file size (10 MB) when uploading documents. Applicants should ensure that any attachments uploaded with their application are not “protected” or “pass-worded” documents.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

Role	Create and Maintain User Roles	Initiate Application	Complete Application	Submit Application	Only View the Application
Delegated Admin	X				
Grantee		X	X		
Grantee Contract Signatory		X	X	X	
Grantee Payment Signatory		X	X		
Grantee System Administrator		X	X	X	
Grantee View Only					X

PLEASE NOTE: Waiting until the last several days to complete your Application online can be dangerous, as you may have technical questions. Beginning the process of applying as soon as possible will produce the best results.

Applications will not be accepted via fax, e-mail, paper copy or hand delivery.

LATE APPLICATIONS WILL NOT BE ACCEPTED.

F. Department of Health's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department's sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any Applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of applications, in the Department's sole discretion.
6. Use Application information obtained through site visits, management interviews, and the state's investigation of an Applicant's qualifications, experience, ability, or financial standing, and any material or information submitted by the Applicant in response to the Department's request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to Application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to Application opening, direct Applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Negotiate with successful Applicants within the scope of the RFA in the best interests of the State.
13. Conduct contract negotiations with the next responsible Applicant, should the Department be unsuccessful in negotiating with the selected Applicant.
14. Utilize any and all ideas submitted with the Applications received, at the Department's sole discretion.
15. Unless otherwise specified in the RFA, every offer in an Applicant's Application is firm and not revocable for a period of 60 days from the Application opening.

16. Waive or modify minor irregularities in Applications received after prior notification to the Applicant.
17. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an Applicant's Application and/or to determine an Applicant's compliance with the requirements of the RFA.
18. Eliminate any term of this RFA that cannot be complied with by any of the Applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the State.

G. Term of Contract

Any contract resulting from this RFA will be at the discretion of the Commissioner of Health for purposes described in this RFA.

It is expected that contracts resulting from this RFA will have the following time period: October 1, 2024 through September 30, 2029 (consistent with the accepted construction schedule).

Only Eligible Expenses determined allowable under the contract budget and work plan and incurred on or after the start date of the contract (expected no earlier than October 1, 2024), may be vouchered for reimbursement. Any obligations assumed by an Eligible Applicant prior to execution of the MGC contract are assumed at risk.

Continued funding throughout this five-year period is contingent upon availability of funding and State budget appropriations and the Grantee's continued satisfactory performance of its obligations under the Contract. NYSDOH also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Contract for Grants can be found in the Forms Menu once an application to this funding opportunity is started.

H. Payment & Reporting Requirements of Grant Awardees

1. No advances will be allowed for contracts resulting from this procurement.
2. The Grantee will be required to submit invoices and required reports of expenditures based upon the terms for payment set forth in Attachment A-1 to its Grant Contract to the State's designated payment office (below) or, if requested by the Department, through the Grants Gateway:

Grants Management Bureau
NYS Department of Health
ESP, Corning Tower, Room 2863
Albany, NY 12237
Email: Statewide4transformation@health.ny.gov

A Grantee must provide complete and accurate billing invoices in order to receive payment of the grant funding provided for under the terms of its Grant Contract. Invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department, and the Office of the State Comptroller (OSC). Payment for invoices submitted by the Grantee shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner of Health, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. Each Grantee acknowledges that it will not receive payment on any claims for reimbursement submitted under its Grant Contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be: Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Workplan.

3. The Grantee will be required to submit the following reports to the Department of Health at the address above or, if requested by the Department, through the Grants Gateway:
 - Quarterly reports on the status of the Statewide Health Care Facility Transformation Program IV project. Such reports shall be submitted no later than 30 days after the close of the quarter, and shall be consistent with the provisions of the terms of the grant contractor's State of New York Master Contract for Grants. The reports shall include:
 - Progress made toward Statewide Health Care Facility Transformation Program IV objectives;
 - A status update on Project process and performance metrics and milestones;
 - Information on Project spending and budget; and
 - A summary of public engagement and public comments received.

All payment and reporting requirements will be detailed in Attachment D of the final NYS Master Contract for Grants,

I. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the Department recognizes its obligation to promote opportunities for maximum feasible participation of New York State-certified minority- and women-owned business enterprises (M/WBEs) and the employment of minority group members and women in the performance of NYSDOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and

Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that NYSDOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises ("M/WBE") and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the Department of Health hereby establishes a goal of **30%** as follows:

- 1) For Not-for-Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the total amount of the Budget provided for the Work Plan in the Grant Contract entered into pursuant to this RFA.

The goal on the Eligible Expenditures portion of a Grant Contract awarded pursuant to this RFA will be **15%** for Minority-Owned Business Enterprises ("MBE") participation and **15%** for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified M/WBE firms). A Grantee awarded a Grant Contract pursuant to this RFA must document good faith efforts to provide meaningful participation by M/WBEs as subcontractors or suppliers in the performance of the Grant Contract and Grantee will agree under the terms of its Grant Contract that NYSDOH may withhold payment pending receipt of the required M/WBE documentation required by the Department or the OSC. For guidance on how NYSDOH will determine "good faith efforts," refer to 5 NYCRR §142.8.

The directory of New York State Certified M/WBEs can be viewed at: <https://ny.newnycontracts.com>. The directory is found on this page under "NYS Directory of Certified Firms" and accessed by clicking on the link entitled "Search the Directory". Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented by a Grantee to evidence its good faith efforts to encourage M/WBE participation in the performance of its obligations under its Grant Contract.

By submitting an Application, each Applicant and potential Grantee agrees to complete an M/WBE Utilization plan as directed in **Attachment 4** of this RFA. NYSDOH will review the M/WBE Utilization Plan submitted by each Grantee. If a Grantee's M/WBE Utilization Plan is not accepted, NYSDOH may issue a Notice of Deficiency. If a Notice of Deficiency is issued, Grantee agrees that it shall respond to the Notice of Deficiency within seven (7) business days of receipt. NYSDOH may disqualify a Grantee as being **non-responsive** under the following circumstances:

- a) If a Grantee fails to submit a M/WBE Utilization Plan;

- b) If a Grantee fails to submit a written remedy to a Notice of Deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If NYSDOH determines that the Grantee has failed to document good-faith efforts to meet the established NYSDOH M/WBE participation goals for the procurement.

In addition, Grantees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

J. Participation Opportunities For New York State Certified Service-Disabled Veteran Owned Businesses

Article 3 of the New York State Veterans' Services Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses ("SDVOB"), thereby further integrating such businesses into New York State's economy. NYSDOH recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of NYSDOH contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders are expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

I. Contract Goals

- A. NYSDOH hereby establishes an overall goal of 6% for SDVOB participation, based on the current availability of qualified SDVOBs. For purposes of providing meaningful participation by SDVOBs, the Bidder/Contractor should reference the directory of New York State Certified SDVOBs found at: <https://ogs.ny.gov/veterans/>. Questions regarding compliance with SDVOB participation goals should be directed to the NYSDOH Designated Contacts. Additionally, following Contract execution, Contractor is encouraged to contact the Office of General Services' Division of Service-Disabled Veterans' Business Development at 518-474-2015 or VeteransDevelopment@ogs.ny.gov to discuss additional methods of maximizing participation by SDVOBs on the Contract.
- B. Contractor must document "good faith efforts" to provide meaningful participation by SDVOBs as subcontractors or suppliers in the performance of the Contract (see clause IV below).

II. SDVOB Utilization Plan

- A. In accordance with 9 NYCRR § 252.2(i), Bidders are required to submit a completed SDVOB Utilization Plan on Form SDVOB 100 (Attachment 5) with their bid.
- B. The Utilization Plan shall list the SDVOBs that the Bidder intends to use to perform the Contract, a description of the work that the Bidder intends the SDVOB to perform to meet the goals on the Contract, the estimated dollar amounts to be paid to an SDVOB, or, if not known, an estimate of the percentage of Contract work the SDVOB will perform. By signing the Utilization Plan, the Bidder acknowledges that making false representations or providing

information that shows a lack of good faith as part of, or in conjunction with, the submission of a Utilization Plan is prohibited by law and may result in penalties including, but not limited to, termination of a contract for cause, loss of eligibility to submit future bids, and/or withholding of payments. Any modifications or changes to the agreed participation by SDVOBs after the Contract award and during the term of the Contract must be reported on a revised SDVOB Utilization Plan and submitted to NYSDOH.

- C. NYSDOH will review the submitted SDVOB Utilization Plan and advise the Bidder/Contractor of NYSDOH acceptance or issue a notice of deficiency within 20 days of receipt.
- D. If a notice of deficiency is issued, Bidder/Contractor agrees that it shall respond to the notice of deficiency, within seven business days of receipt, by submitting to NYSDOH a written remedy in response to the notice of deficiency. If the written remedy that is submitted is not timely or is found by NYSDOH to be inadequate, NYSDOH shall notify the Bidder/Contractor and direct the Bidder/Contractor to submit, within five business days of notification by NYSDOH, a request for a partial or total waiver of SDVOB participation goals on SDVOB 200. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or proposal.
- E. NYSDOH may disqualify a Bidder's bid or proposal as being non-responsive under the following circumstances:
 - (a) If a Bidder fails to submit an SDVOB Utilization Plan;
 - (b) If a Bidder fails to submit a written remedy to a notice of deficiency;
 - (c) If a Bidder fails to submit a request for waiver; or
 - (d) If NYSDOH determines that the Bidder has failed to document good faith efforts.
- F. If awarded a Contract, Contractor certifies that it will follow the submitted SDVOB Utilization Plan for the performance of SDVOBs on the Contract pursuant to the prescribed SDVOB contract goals set forth above.
- G. Contractor further agrees that a failure to use SDVOBs as agreed in the Utilization Plan shall constitute a material breach of the terms of the Contract. Upon the occurrence of such a material breach, NYSDOH shall be entitled to any remedy provided herein, including but not limited to, a finding of Contractor non-responsibility.

III. Request for Waiver

- A. **Prior to submission of a request for a partial or total waiver, Bidder/Contractor shall speak to the Designated Contacts at NYSDOH for guidance.**
- B. In accordance with 9 NYCRR § 252.2(m), a Bidder/Contractor that is able to document good faith efforts to meet the goal requirements, as set forth in clause IV below, may submit a request for a partial or total waiver on Form SDVOB 200, accompanied by supporting documentation. A Bidder may submit the request for waiver at the same time it submits its SDVOB Utilization Plan. If a request for waiver is submitted with the SDVOB Utilization Plan and is not accepted by NYSDOH at that time, the provisions of clauses II (C), (D) & (E) will

apply. If the documentation included with the Bidder's/Contractor's waiver request is complete, NYSDOH shall evaluate the request and issue a written notice of acceptance or denial within 20 days of receipt.

- C. Contractor shall attempt to utilize, in good faith, the SDVOBs identified within its SDVOB Utilization Plan, during the performance of the Contract. Requests for a partial or total waiver of established goal requirements made subsequent to Contract award may be made at any time during the term of the Contract to NYSDOH, but must be made no later than prior to the submission of a request for final payment on the Contract.
- D. If NYSDOH, upon review of the SDVOB Utilization Plan and Monthly SDVOB Compliance Report (SDVOB 101) determines that Contractor is failing or refusing to comply with the contract goals and no waiver has been issued in regards to such non-compliance, NYSDOH may issue a notice of deficiency to the Contractor. The Contractor must respond to the notice of deficiency within seven business days of receipt. Such response may include a request for partial or total waiver of SDVOB contract goals.

Waiver requests should be sent to NYSDOH.

IV. Required Good Faith Efforts

In accordance with 9 NYCRR § 252.2(n), Contractors must document their good faith efforts toward utilizing SDVOBs on the Contract. Evidence of required good faith efforts shall include, but not be limited to, the following:

- (1) Copies of solicitations to SDVOBs and any responses thereto.
- (2) Explanation of the specific reasons each SDVOB that responded to Bidders/Contractors' solicitation was not selected.
- (3) Dates of any pre-bid, pre-award or other meetings attended by Contractor, if any, scheduled by NYSDOH with certified SDVOBs whom NYSDOH determined were capable of fulfilling the SDVOB goals set in the Contract.
- (4) Information describing the specific steps undertaken to reasonably structure the Contract scope of work for the purpose of subcontracting with, or obtaining supplies from, certified SDVOBs.
- (5) Other information deemed relevant to the waiver request.

V. Monthly SDVOB Contractor Compliance Report

In accordance with 9 NYCRR § 252.2(q), Contractor is required to report Monthly SDVOB Contractor Compliance to NYSDOH during the term of the Contract for the preceding month's activity, documenting progress made towards achieving the Contract SDVOB goals. This information must be submitted using form SDVOB 101 available on the NYSDOH website and should be completed by the Contractor and submitted to NYSDOH, by the 10th day of each month during the term of the Contract, for the preceding month's activity to:

Statewide4transformation@health.ny.gov.

VI. Breach of Contract and Damages

In accordance with 9 NYCRR § 252.2(s), any Contractor found to have willfully and intentionally failed to comply with the SDVOB participation goals set forth in the Contract, shall be found to have breached the contract and Contractor shall pay damages as set forth therein.

ALL FORMS ARE AVAILABLE AT: <https://ogs.ny.gov/veterans/>

K. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award of a grant to a successful Applicant pursuant to the terms of this RFA and in order to initiate a Grant Contract with the New York State Department of Health, a Grantee must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, the Applicant should include the Vendor Identification number in your organization information. If not enrolled, to request assignment of a Vendor Identification number, an Applicant should please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at: <https://www.osc.state.ny.us/files/vendors/2017-11/vendor-form-ac3237s-fe.pdf>

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

L. Vendor Responsibility Questionnaire

The Department strongly encourages each Applicant to file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. The Vendor Responsibility Questionnaire must be updated and certified every six (6) months. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <https://www.osc.state.ny.us/state-vendors/vendrep/file-your-vendor-responsibility-questionnaire> or go directly to the VendRep system online at <https://www.osc.state.ny.us/state-vendors/vendrep/vendrep-system>.

An Applicant must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at itservicedesk@osc.ny.gov.

Applicants opting to complete online should complete and upload the Vendor Responsibility Attestation (Attachment 3) of the RFA. The Attestation is located under Pre-Submission Uploads and once completed should be uploaded in the same section.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, and upload it with their Application in the Pre-Submission Uploads section in place of the Attestation.

M. Vendor Prequalification for Not-for-Profits

Each not-for-profit Applicant subject to prequalification is required to prequalify prior to submitting its Application in the Grants Gateway.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, New York State has instituted key reform initiatives to the grant contract process which requires a not-for-profit Applicant to register in the Grants Gateway and complete the Vendor Prequalification process in order for any Application submitted by that Applicant to be evaluated. Information on these initiatives can be found on the [Grants Management Website](#).

An Application received from a not-for-profit Applicant that (a) has not Registered in the Grants Gateway or (b) has not Prequalified in the Grants Gateway or SFS on the Application's due date specified on the Cover Page of this RFA cannot be evaluated. Such Applications will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Management Website details the requirements and an [online tutorial](#) are available to walk users through the process. Please see Section M.4, below, for SFS related Grantee User Manual and SFS related prequalification steps.

1) Register for the Grants Gateway

- On the Grants Management Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the NYS Grants Management office at the address provided in the submission instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

If you have previously registered and do not know your Username, please email grantsgateway@its.ny.gov . If you do not know your Password, please click the [Forgot Password](#) link from the main log in page and follow the prompts.

2) Complete your Prequalification Application

IMPORTANT NOTE: Due to system conversion (Transition to SFS) expected on January 16th, 2024, Applicants that are not fully prequalified in the NYS Grants Gateway by close of business (COB) January 9th, 2024, will need to prequalify in the NYS Statewide Financial System (SFS). Additionally, if an applicant's vault expires prior to application submission, applicant will need to prequalify in SFS. The first day that the SFS prequalification modules will be available is January 16th, 2024. Please see Step 4 below for more on SFS Prequalification.

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the New York State agency from which you have received the most grants. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.
- Specific questions about the prequalification process should be referred to your primary New York State agency representative or to the Grants Gateway Team at grantsgateway@its.ny.gov.

3) **Submit Your Prequalification Application**

- After completing your Prequalification Application, click the **Submit Document Vault Link** located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.
- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.
- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

All potential Applicants are strongly encouraged to begin Grants Gateway Registration and Grants Gateway/SFS Prequalification process as soon as possible in order to participate in this opportunity.

4) **Complete and Submit your Prequalification in the NYS Statewide Financial System (SFS)**

(Prequalification modules will be available in the NYS Statewide Financial System beginning on January 16th, 2024)

- Applicants will first need to create an account in SFS. Applicants that need to create an account should do so at the following link: <https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal>. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).
- Instructions for SFS Prequalification can be found on Page 20 of the SFS Grantee User Manual entitled, “! Grantee Processing in SFS”. This user manual is accessible to organizations with an SFS account under the SFS Coach Tile/Button in the SFS Vendor Portal. Select “Handbook: User Manual with Screenshots” from the Training Type drop down to locate the manual. If you have any problems accessing the manual please contact HelpDesk@sfs.ny.gov. Please see the section entitled, “Enter and Submit a Prequalification Application”, located on page 20 of the SFS Grantee

User Manual, for complete instructions on how to complete and submit an SFS Prequalification in the NYS Statewide Financial System.

N. General Specifications

1. By submitting the "Application Form" each Applicant attests to its express authority to sign on behalf of the Applicant.
2. Grantees will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of any Contract awarded pursuant to this RFA will possess the qualifications, training, licenses, and permits as may be required within such jurisdiction.
3. Submission of an Application indicates the Applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the Master Contract for Grants. Any exceptions the Applicant would like considered by the Department relating to the terms and conditions of this RFA and/or Master Contract for Grants must have been raised during the Question and Answer Phase of this RFA (See, Section IV.B.).
4. An Applicant may be disqualified from receiving an award if such Applicant or any subsidiary, affiliate, partner, officer, agent, or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts, in the State of New York or otherwise.
5. Provisions Upon Default
 - a. If an Applicant is awarded a grant pursuant to this RFA, the services to be performed by the successful Applicant pursuant to the terms of the Grant Contract entered into with the Department shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the Contract resulting from this RFA.
 - b. In the event that the Grantee, through any cause, fails to perform any of the terms, covenants, or promises of any Contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the Contract by giving notice in writing of the fact and date of such termination to the Grantee.
 - c. If, in the judgement of the Department, the Grantee acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any Contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Grantee. In such case the Grantee shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Grantee up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Grantee was engaged in at the time of such termination, subject to audit by the State Comptroller.

V. Completing the Application

A. Application Format/Content

Please refer to the Grants Gateway: Vendor User Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Management website at: <https://grantsmanagement.ny.gov/vendor-user-manual>. Additional information for applicants is available at: <https://grantsmanagement.ny.gov/resources-grant-applicants>.

The Grants Gateway works well in most cases with all browsers, including Microsoft Edge, Google Chrome, Safari, and Firefox. However, you will need to use Internet Explorer Compatibility Mode in Microsoft Edge if you need to save 500-character limit fields in the Work Plan. You can access Internet Explorer mode by right-clicking on a tab in Edge and selecting the option “Reload Tab in Internet Explorer Mode”.

Please respond to each of the sections described below when completing the Grants Gateway online application. Your responses comprise your application. Please respond to all items within each section. When responding to the statements and questions, be mindful that application reviewers may not be familiar with the applicant and its services. Therefore, answers should be specific, succinct and responsive to the statements and questions as outlined.

It is each Applicant’s responsibility to ensure that all materials included in its Application have been properly prepared and submitted. Applications must be submitted via the Grants Gateway by the Application deadline date and time specified on the Cover Page of this RFA.

Failure to submit the required copy of a New York State Operating Certificate, New York State Certification, or New York State Medical License, and/or audited financial statements and any other required evidence of applicant’s qualifications, will result in disqualification of your application.

- Pre-Submission Uploads

As a reminder, the following attachments need to be uploaded under the Pre-Submission Uploads section of the Grants Gateway in order to submit an application in the system.

1. Application Cover Sheet (Attachment 1)
2. Projected Financial Information (Attachment 2)
3. Vendor Responsibility Attestation (Attachment 3)
4. Minority & Women-Owned Business Enterprise Requirement Forms (Attachment 4)
5. Service- Disabled Veteran Owned Business Requirement Forms (Attachment 5)
6. Required Proof of Minimum Eligibility (Attachment 6)
7. IT Questionnaire (Attachment 7)
8. Required 2022 IRS 990 Form (Attachment 8)
9. Required Audited Financial Statements (Attachment 9)

Note: Attachment 7 only needs to be completed and uploaded if the Eligible Project includes Information Technology expenses. Refer to Section III.B.

- Program Specific Questions

Applicants are encouraged to provide a robust response to all Program Specific Questions.

Applicants should be mindful of the Evaluation Plan described in Section V.C. Review and Award Process. The Review Team will assign a rating to each of the “Grant Evaluation Criteria” listed in RFA Section III. C. “Evaluation Criteria”. Questions 4.a. through 4.j., 6 and 7, directly relate to the Evaluation Criteria.

1. Previous Funding Applications

- a. Did your organization apply for funds through the Statewide Health Care Facility Transformation Program I (SHCFTP I RFA #1607010255) or the Statewide Health Care Facility Transformation Program II (SHCFTP II RFA #17648) or the Statewide Health Care Facility Transformation Program III (SHCFTP III RFA #18406) or Statewide Health Care Facility Transformation Program IV – ED (SHC4ED #20224)?
- b. If yes to 1.a., answer the following questions:
 - i. Was the project previously submitted for SHCFTP I and/or SHCFTP II and/or SHCFTP III and/or SHCFTP IV – ED funding substantially the same as the current project being submitted? Indicate the applicant’s name, project name and amount of grant funds requested. If no to question 1a please indicate "no" in response.

2. Applicant Organization Type

- a. Indicate the applicant organization type from the following types of Eligible Applicants:
 - General Hospitals licensed under Article 28 of the PHL
 - Residential Health Care Facilities licensed under Article 28 of the PHL
 - Diagnostic and Treatment Centers certified or licensed under Article 28 of the PHL
 - Adult Care Facilities licensed under Article 7 of the SSL
 - Assisted living programs approved by NYSDOH pursuant to section 461-1 of the SSL
 - Children’s Residential Treatment Facilities licensed pursuant to Article 31 of the MHL
 - Mental Health Clinics licensed or granted an operating certificate under Article 31 of the MHL
 - Alcohol and Substance Abuse Treatment Clinics licensed or granted an operating certificate under Article 32 of the MHL
 - Home Care Providers certified or licensed under Article 36 of the PHL
 - Clinics licensed or granted an operating certificate under Article 16 of the MHL
 - Residential or Day Program Facilities licensed or granted an operating certificate under Article 16 of the MHL
 - Hospices licensed or granted an operating certificate under Article 40 of the MHL

- Independent practice associations or organizations with a valid New York Department of State identification number
 - Primary Care Providers with a New York State Medical License
 - Community-based programs funded under the Office of Mental Health, the Office of Addiction Services and Supports, the Office for People with Developmental Disabilities, or through local governmental units as defined under Article 41 of the MHL
- b. Provide proof that the applicant meets the minimum eligibility requirements under Section II. Who May Apply. Proof of subsection (b) eligibility includes an uploaded copy of a New York State Operating Certificate for an Article 7, 16, 28, 31, 32, 36, 40 or 41 provider organization, or an uploaded copy of a New York State Medical License for a primary care provider or a filing receipt or copy of Articles of Organization for an independent practice association or organization. Provide proof of all other current certifications/licensures related to a project. All documents must be combined into a single PDF no larger than 10MB and uploaded as Attachment 6 via the Grants Gateway in the Pre-Submission Uploads section of the online application.

An Eligible Applicant must meet minimum eligibility requirements at the time the application is submitted. An application must have one Eligible Applicant and the project as proposed in the application must primarily benefit the Eligible Applicant. The proposed project should align with the licensure the applicant is using to demonstrate eligibility for this grant funding.

3. **Organizational Capacity**

Describe the Eligible Applicant's organization by answering each of the following questions specifically below:

- a. The Eligible Applicant's exact corporate name, board composition, ownership and affiliations, and number of employees.
- b. Provide the name, title, email and phone number of the highest-ranking employee in the organization. For example, the Chief Executive Officer of the hospital, diagnostic and treatment center, or clinic; or the Administrator of the nursing home.
- c. Provide the name, title, email, and phone number of the primary contact for routine questions on the application.
- d. Provide the name, title and salary of all employees in nonclinical titles whose salaries are \$250,000 or more.
- e. A discussion of the Eligible Applicant's mission, including the size of the organization and scope of services provided.
- f. Number of admissions or patient visits during the most recent 12-month cost reporting year.

- g. Provide the payer composition of populations served by the Eligible Applicant: Describe the payer mix of the population served and indicate the percent of the population served that is (1) Medicaid, (2) Medicare, (3) uninsured, and (4) commercially insured. The Medicaid category should include both Medicaid Managed Care and Medicaid fee-for-services.
- h. Geographic region served by the Eligible Applicant. The geographic region served is defined as the service area from which the provider draws at least 75 percent of its patients during the most recent 12-month cost reporting period.
- i. Applicant location in relation to like providers. Identify if the Eligible Applicant provides health care services that otherwise would not be available to the population of the geographic region due to transportation infrastructure, distance and/or travel times from other like providers. Specify by name(s) the next closest like provider(s) and the distance or travel time to this provider(s).
- j. Types of health care services provided. Identify if the Eligible Applicant provides any specialized health care services that otherwise would not be available to the population of the geographic region.

4. **The Project(s)**

Describe the Eligible Project(s). Applicants are encouraged to provide a robust, detailed description of the Eligible Project to be funded with SHCFTP IV funding so that it may be fairly evaluated. The description should address the components outlined in questions 4.a. through 4.j. If a specific question is not applicable to the Eligible Project, indicate “Not Applicable.”

Applicants can submit more than one Eligible Project. The decision to submit separate applications or one application should be based on whether the Eligible Projects are interdependent.

Separate applications must be submitted for non-capital projects or debt retirement and restructuring purposes even if they are part of the same overall purpose for which an application for a capital project(s) is also being submitted.

It is preferred that applicants submit separate applications for each Eligible Project. Separate applications will enable the review team to better consider the individual merits of each application. **If an Eligible Applicant submits multiple, separate applications for funding under this RFA, the Eligible Applicant must assign a priority to each application.**

If submitting one application with more than one Eligible Project, the Eligible Projects should be considered interdependent to creating a financially sustainable system of care. If applications are interdependent and the overall Eligible Project cannot be completed unless all are funded, Eligible Applicants should describe this interdependence.

Include in the description of each Eligible Project the following:

- a. A concise summary of the Eligible Project(s).
- b. The purpose of the Eligible Project(s).

- c. Separate applications are required for capital and non-capital debt retirement and restructuring Eligible Projects. If submitting multiple separate applications, address each of the following:
 - i. Indicate the rank order of priority for each Eligible Project.
 - ii. Within a given application, multiple Eligible Projects and multiple locations may be included if they are considered interdependent to creating a financially sustainable system of care. If applications are interdependent and the overall Eligible Project cannot be completed unless all are funded, describe this interdependence.
- d. For each Eligible Project:
 - i. As applicable, describe the steps to be taken or that have been implemented to create a financially sustainable system of care. Include actions such as debt retirement and restructuring, a merger, consolidation, acquisition, or other significant restructuring activity and/or partnership or other relationship between the Eligible Applicant and a separate health care facility or system(s) as appropriate.
 - ii. As applicable, for each Eligible Project, identify how it will promote regional consolidation, restructuring or collaboration.
- e. For each Eligible Project, describe how will it impact improved quality of care, patient outcomes and patient experience.
 - i. Identify and describe current metrics that reflect the quality of care, patient outcomes and patient experience, of the Eligible Applicant. Metrics include, but are not limited to, quality ratings, survey findings, health care data, and patient and provider satisfaction surveys.
 - ii. Describe how the Eligible Project will enhance the quality of care, patient outcomes and patient experience using metrics reported in e. i.
- f. For each Eligible Project, describe how it will contribute to the integration, preservation and/or expansion of essential health care services in the community or communities served by the Eligible Applicant.
- g. For each Eligible Project, describe how the needs of the residents of the community or communities that will be served by the Eligible Project were assessed. Eligible Applicants should provide thorough, concise information that demonstrates a comprehensive understanding of the health care needs of the community or communities served.
 - i. The community need assessment should be specific to the Eligible Project. Note that citing general or federally required Community Needs Assessments alone is not satisfactory. The assessment should:

- a. Describe the health status of the community served by the Eligible Applicant and any disparities noted. The assessment should be based on documented information, such as health status indicators, demographics, and insurance status of the population.
 - b. Describe the adequacy of service capacity in the community. The analysis of service capacity should be based on data on service volume, occupancy, and utilization by existing providers.
 - c. Based on the community needs assessment, identify what additional health care services are needed.
- ii. If health care services are proposed to be eliminated or consolidated, provide the rationale and adequacy of service capacity in the community or region after the elimination or consolidation.
- iii. Describe the relationship between the Eligible Project and identified community need for health services.
- iv. Describe the extent to which the Eligible Applicant engaged the community affected by the Eligible Project and how community engagement shaped the Eligible Project.
 - a. Identify the specific stakeholder, patient, family or caregiver, or community groups that were contacted and the manner in which they were engaged (meeting, town hall forum, etc.).
 - b. Describe the extent to which stakeholders and community members were engaged in advance during the planning of the Eligible Project, and how their feedback was incorporated into the Eligible Project.
 - c. Describe how the Eligible Applicant intends to keep the community or communities served informed of the progress of the Eligible Project.
- h. For each Eligible Project, describe how it will advance health equity for populations in the community or communities served by the Eligible Applicant. For this purpose, New York State Public Health Law, Article 2-F definition is used such that “health equity” shall mean achieving the highest level of health for all people and shall entail focused efforts to address avoidable inequalities by equalizing those conditions for health for those that have experienced injustices, socioeconomic disadvantages, and systemic disadvantages, especially for medically underserved groups. Medically underserved groups include low-income people, racial and ethnic minorities, immigrants, women, lesbian, gay, bisexual, transgender, or other-than-cisgender people, people with disabilities, and older adults, among other groups.
 - i. Provide a description of the unintended positive and unintended negative impacts the Eligible Project may have on health equity and medically underserved groups in the community or communities served by the Eligible Applicant. Explain how the Eligible Project could positively or negatively affect medically underserved groups in their ability to access high quality, timely, comprehensive, culturally competent, and accessible service or care.

- ii. Describe the extent to which the Eligible Project reduces or mitigates existing architectural barriers for patients or residents with mobility impairments. If the Eligible Project newly creates or exacerbates existing architectural barriers for people with mobility impairments, describe how construction changes to the facility will help eliminate or mitigate the architectural barriers. If not applicable to the project, write N/A and provide justification.
 - iii. How does the Eligible Applicant intend to convey what is going to happen at the facility to patients/residents and the communities it serves? How will the communication be tailored (or the outreach be unique) to individuals with Limited English Proficiency and/or individuals with speech, hearing, or visual impairments?
 - iv. List existing and potential evidence-based measures and mechanisms (i.e. policies, procedures, internal controls, systems, or accountability measures) that can be put in place with respect to the Eligible Project to help mitigate the unintended negative impacts to medically underserved groups as identified in section h(i).
- i. For each Eligible Project, describe the benefit to Medicaid beneficiaries, Medicare beneficiaries, and uninsured/underinsured individuals. As part of the description, include the following:
- i. Provide data comparing the percent of Medicaid beneficiaries served by the Eligible Applicant in the last calendar year that data is available to the percent of Medicaid beneficiaries in the larger community and/or county.
 - ii. Estimate the anticipated change in the percent of Medicaid beneficiaries served by the Eligible Applicant because of implementing the Eligible Project. If awarded, the Eligible Applicant may be asked to provide follow-up data related to this question.
 - iii. Describe outreach efforts to improve access to services for Medicaid beneficiaries.
 - iv. Provide data comparing the percent of Medicare beneficiaries served by the Eligible Applicant in the last calendar year that data is available to the percent of Medicare beneficiaries and in the larger community and/or county.
 - v. Estimate the anticipated change in the percent of Medicare beneficiaries served by the Eligible Applicant because of implementing the Eligible Project. If awarded, the Eligible Applicant may be asked to provide follow-up data related to this question.
 - vi. Describe outreach efforts to improve access to services for Medicare beneficiaries.
 - vii. Provide data comparing the percent of uninsured/underinsured individuals served by the Eligible Applicant in the last calendar year that data is available to the percent of uninsured/underinsured individuals in the larger community and/or county.
 - viii. Estimate the anticipated change in the percent of uninsured/underinsured individuals served by the Eligible Applicant because of implementing the Eligible Project. If

awarded, the Eligible Applicant may be asked to provide follow-up data related to this question.

- ix. Describe outreach efforts to improve access to services for the uninsured/underinsured.

- j. Describe whether the Eligible Applicant has access to alternative financing other than Statewide Health Care Facility Transformation Program grant funds to finance the Eligible Project. If these grant funds are the only alternative financing available, please describe all actions taken and sources of funds that the Eligible Applicant pursued.

5. **Project Budget**

A Project Budget must be provided for all capital Eligible Projects. See Section III. B. Eligible and Excluded Expenses for a full description of Eligible and Excluded Expenses and Disallowed Costs.

All costs must be related to the provisions of SHCFTP IV, as well as be consistent with the scope of services, reasonable and cost effective. Justification for each cost should be submitted in narrative form. Any ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items.

- a. A budget that includes cost estimates for all components of the Eligible Project must be submitted as part of the application in the Grants Gateway. Applicants are instructed to **also** complete Attachment 2: Projected Financial Information and follow the instructions provided in the attachment. Tab 1, Project Fund Sources, and Tab 2, Use of Funds, need to identify and describe sources of alternative funding for the Eligible Project (funds other than the SHCFTP IV grant funds or “Other Funds”), including cash, borrowed funds, governmental agencies or other grant funds or other sources. Provide evidence of the commitment of these fund sources. A commitment that is contingent upon receipt of the SHCFTP IV Grant applied for is acceptable. Only applications that request grant funding for Eligible Expenditures (as defined in Section III.B. of the RFA) will be funded. Attachment 2 can be found in the Pre-Submission Uploads section of the Grants Gateway application and once completed, Applicants are instructed to upload there.
- b. For each Eligible Project, an estimate of the total cost, including the amount of SHCFTP IV grant funding requested and any other sources and associated amounts of alternative funding necessary to fully fund the Eligible Project, if applicable.
- c. Provide a detailed narrative description of each budgeted item, including the factors used to determine the reasonableness of each budgeted item such as any standard or benchmark used to determine the expenditure, if available. These budget justifications should be specific enough to show what the Eligible Applicant means by each line item and how the line item supports the overall Eligible Project.

- d. If applicable, for non-capital debt retirement and restructuring, provide a detailed description and budget related to the health care transformation activities the Eligible Applicant will undertake as a result of the debt retirement and restructuring.
- e. If applicable, for Information Technology expenses related to the Eligible Project, upload a completed IT Questionnaire as Attachment 7 via the Grants Gateway in the Pre-Submission Uploads section of the online application.

6. **Eligible Applicant Financial Stability**

- a. Upload a copy of Eligible Applicant’s 2022 IRS 990 Form. All pages must be combined into a single PDF no larger than 10MB and uploaded as Attachment 8 via the Grants Gateway in the Pre-Submission Uploads section of the online application.
- b. Upload a copy of the prior three years’ annual audited financial statements of the Eligible Applicant and any other evidence of financial stability. Entities whose financial statements have not been subjected to an audit should include any additional information available to satisfy this test and appropriate certifications. All documents must be combined into a single PDF no larger than 10MB and uploaded as Attachment 9 via the Grants Gateway in the Pre-Submission Uploads section of the online application.

**DO NOT PASSWORD PROTECT THE DOCUMENT. ENSURE ALL
PASSWORDS ARE REMOVED PRIOR TO UPLOADING.**

- o **Applicants should submit new financial forms to the Statewide4transformation@health.ny.gov email address if their financial situation significantly changes after application submission. A significant financial change is defined as a situation that may jeopardize the long-term sustainability of the applicant.**
- c. If the applicant has an active or passive parent organization or closely related party, explain the financial relationship of the parent organization or closely related party to the Eligible Project. Will any funds for this Project be provided through affiliates or the parent organization? If this question is not applicable, indicate “Not Applicable.”
 - o If the Eligible Applicant has an active or passive parent organization or closely related party, the prior three years’ annual audited financial statements of the active or passive parent organization or closely related party, and any other evidence of financial stability, must also be combined into a single PDF no larger than 10MB and uploaded to the Grantee Document folder section of the online application.
- d. If the applicant is an independent practice association or organization and has no audited financial statements, include any other evidence of financial stability by combining information into a single PDF no larger than 10MB and uploaded as Attachment 9 in the Pre-Submission Uploads section of the online application. In addition, if applicable, describe the applicant’s related corporations and their ownership and the relationship of these entities to the Eligible Project. If this question is not applicable, indicate “Not Applicable.”

NOTE: The following errors may result in disqualification of your application:

- If an applicant does not submit three years' annual audited financial statements or, in the case of an independent practice association or organization, any other evidence of this stability OR
- If an applicant uploads a password protected PDF, the Application PDF will fail.

7. Eligible Project Impact on Eligible Applicant Long-term Financial Sustainability

- a. Using Attachment 2: Projected Financial Information, Tab 3, Impact – Financial Viability, located in the Pre-Submission Uploads section of the Forms Menu, complete the financial feasibility projections for the Eligible Applicant. Attachment 2 can be found in the Pre-Submission Uploads section of the Grants Gateway application and once completed, Applicants are instructed to upload there.
- b. Describe the financial impact or benefit of the Eligible Project(s) on the Eligible Applicant.
 - i. Describe the Eligible Project(s)' financial impact or benefit through incremental revenues and expenses and how it will affect the long-term financial sustainability of the Eligible Applicant.
 - ii. Describe, in detail, all financial projections used to estimate the financial impact of the Eligible Project(s), including assumptions. This narrative should include, if relevant, changes in reimbursement rates, changes in utilization of services, change in payor mix, revenue and expenses, cost savings, balance sheet and cash uses and sources, etc.
- c. If applicable, describe how the Eligible Project will decrease the Eligible Applicant's need for Supplemental Operating Assistance. If these questions are not applicable, indicate "Not Applicable."
 - i. An Eligible Applicant that has received Supplemental Operating Assistance must indicate the amount of Supplemental Operating Assistance received, by year.
 - ii. An Eligible Applicant that has received Supplemental Operating Assistance must also submit as part of this application a Transformation Plan that demonstrates how the proposed use of the SHCFTP IV grant will strengthen their financial sustainability and reduce the need for future State-provided operating subsidies. If selected for an award, the applicant must work with the Department to finalize the Transformation Plan to the satisfaction of the Department before a contract can be executed.

8. Cost Savings

- a. Describe and quantify to the extent possible how the Eligible Project(s) will result in savings to the health care system relative to the Eligible Project(s)' costs.
- b. Quantify the proposed value or return on the State grant investment in the Eligible Project(s) relative to the Eligible Project(s)' costs. Include a discussion of all means by which projected savings can be verified after the Eligible Project(s) are complete.

9. Project Timeline

Describe the timeline anticipated to achieve implementation of the Eligible Project. This timeline should identify specific milestones and approximate dates of completion for each milestone. The application should also provide:

- a. Timeframes for any architectural and engineering design and construction necessary to accomplish each phase of the Eligible Project, if applicable.
- b. Scheduled milestones for the preparation and processing of any application, as required by CON regulations (10 NYCRR Part 710), necessary to secure DOH and/or PHHPC approval for service revisions, changes in governance, relocations, or capital construction that rises to the level of CON review.

10. Workplan

In addition to completing the application questions outlined above, an online Workplan must be completed in the Grants Gateway. The online Workplan will be included in any awarded contract; therefore, it should be sufficiently detailed to allow monitoring of progress toward Project goals.

The online Workplan is essentially an outline/summary of the work associated with the Eligible Project(s) described in the sections above. Please note that if an application is selected for award, the Workplan will be subject to change and can be updated during the contract development/negotiation process.

Please note that the Work Plan for this RFA is limited to the following: 30 Objectives, 60 Tasks, and 90 Performance Measures. The Grants Gateway does not keep a running count of these; applicants will be responsible for ensuring that they stay within these limits. **If you exceed these limits it will jeopardize your ability to submit your application.**

It is the applicant's responsibility to ensure that all materials to be included in its application have been properly prepared and submitted. Applications must be submitted via the Grants Gateway by the date and time posted on the cover of this RFA.

B. Freedom of Information Law

All applications may be disclosed or used by NYSDOH to the extent permitted by law. NYSDOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law (FOIL). **Any portion of an Application that an Applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the general rule regarding the availability to the public of State agency records under the provisions of the Freedom of Information Law, must be clearly and specifically designated in the Application.** If NYSDOH agrees with the Applicant's claim regarding the proprietary nature of any portion of an application, the designated portion of the application will be withheld from public disclosure. Blanket assertions of

proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

Evaluation Criteria

In determining awards for Eligible Projects, the NYSDOH shall consider criteria including, but not limited to:

1. The extent to which the Eligible Project will maintain or improve the long-term financial sustainability of the Eligible Applicant.
2. The extent to which the Eligible Project impacts improved quality of care, patient outcomes and patient experience, for the population in the community or communities served by the Eligible Applicant.
3. The extent to which the Eligible Project contributes to the integration, preservation or expansion of essential health care services in the community or communities served by the Eligible Applicant.
4. The relationship between the Eligible Project and an identified community need and the extent to which community engagement has helped shape the Eligible Project.
5. The extent to which the Eligible Project advances health equity for populations in the community or communities served by the Eligible Applicant.
6. The extent to which the Eligible Project benefits Medicaid or Medicare beneficiaries and uninsured/underinsured individuals.
7. The extent to which the Eligible Applicant has limited access to alternative financing.

Evaluation Plan

Applications received in response to this RFA will be evaluated as follows:

Phase 1 Initial Review: Pass/Fail

NYSDOH staff shall undertake an initial review of all Grant Applications submitted online via the Grants Gateway by the date and time posted on the cover of the RFA and determine:

- i. If the applicant is a not-for-profit entity, it is registered and pre-qualified in the Grants Gateway (if not exempt);
- ii. Whether the Applicant is Eligible as established in accordance with PHL Section 2825-g; and
- iii. Whether the Application contains all of the components required by the RFA. Applications missing required material elements may be eliminated from further review. Applicants may be contacted by the NYSDOH if additional information is needed.

Applications passing Initial Review will be forwarded to Senior Review Teams for evaluation.

A list of applications proposed to be eliminated in Phase 1 due to not meeting the above requirements shall be compiled by NYSDOH and reviewed for determination of whether a disqualification or clarification letter should be sent to the applicant.

Phase 2 Review: Senior Review Teams

Independent reviews of applications will be conducted by Senior Staff. Selection of members will be based on subject matter expertise.

1. Eligibility Verifications

- i. Verify if an Eligible Project is capital or non-capital in nature.
- ii. Verify Applicant possesses all current certifications and/or licensures (Operating Certificate or other proof of licensure or eligibility) related to Eligible Project.

2. Critical Review

- i. For Eligible Applications, Senior Staff will be asked to provide a critical review that identifies strengths and weaknesses of the application.
- ii. Senior Staff will identify if they recommend or not recommend the application undergo further Executive Review Team review.

Senior Staff Reviews for Eligible Applicants and Projects will be forwarded to Executive Review Team members.

A list of all applications proposed to be eliminated in Phase 2 because they are 1) an Ineligible Applicant based on the proposed Eligible Project(s), 2) Ineligible Project or 3) the application contains incomplete or missing components required by the RFA, shall be compiled by NYSDOH and reviewed for determination of whether a disqualification or clarification letter should be sent to the applicant.

Phase 3 Review: Executive Review Team Discussion and Recommendations

The final eligibility determinations and rating of the evaluation criteria will be conducted by an “Executive Review Team”, which may include NYSDOH, and other State agency staff as determined by the Commissioner. The evaluation of applications by the Executive Review Team will be based on or supported by summaries and other factual analyses prepared for the Executive Review Team by NYSDOH or other State agency staff, or in consultation with other internal or external sources. After receipt of initial application summaries and other factual analyses, the Executive Review Team may request that NYSDOH or other State agency staff perform additional review and analysis of selected applications to assist the Executive Review Team in developing final award recommendations.

Overall Award Methodology:

Stage 1: The Executive Review Team will utilize a “Review Team Evaluation Tool” to assign an overall consensus rating of “Good”, “Acceptable”, or “Poor” to each application. In determining the overall rating, the Review Team will assign one of the aforementioned three ratings to each of the “Grant Evaluation Criteria” listed in RFA Section III. C. “Evaluation Criteria. The overall rating for

an application will be determined by a simple majority count of the rating for each individual criterion. For example, if the sum of individual criterion rated “Good” exceeds that of those rated “Acceptable”, or “Poor” then the overall rating for that application will be “Good”. In the event of an equal count of two consecutive ratings (i.e., “Good” and “Acceptable”), the overall rating shall be the higher one. If there is an equal count of two nonconsecutive ratings (i.e., “Good” and “Poor”), the overall rating shall be the lower one.

Within the “Good” category, recommendations for carve out requirements will be made in accordance with PHL Section 2825-g. Additional recommendations for “Good” applications that exceed carve out requirements may also be made.

Awards for Debt Retirement, Working Capital or Other Non-Capital Projects or Purposes:

Awards for debt retirement, working capital, or other non-capital projects or purposes, defined as those that are not eligible to be funded with the proceeds of bonds issued pursuant to Section 1680-r of the PAL, will be made in accordance with the “Overall Award Methodology” outlined above and considered together with projects or purposes that are eligible to be funded with such bond proceeds.

Stage 2: In the event that available funds are not sufficient to support all Eligible Projects assigned to the highest rating tier (e.g., “Good”), the Review Team will assign a score of 1-10 to the following “Tie Breaker” criterion:

The extent to which:

- i. Applications are determined to be in the best financial interest of the State and/or provide the greatest impact to improve quality of care, patient outcomes and patient experience.

The Review Team will then develop consensus recommendations for project awards in accordance with “Tie Breaker” criterion scores.

Bondability Review

DASNY shall undertake a bondability review of those Grant Applications identified by NYSDOH for an award and determine whether the Grant Application contains a request for a Grant to fund Eligible Project Costs in connection with a capital work or purpose which may properly be reimbursed from Bond Proceeds under the Act.

Phase 4. Commissioner and Director of the Division of the Budget Determination of the Final Awards and Amount:

The final awards will be determined solely at the discretion of the Commissioner and the Director of the Division of the Budget based upon:

- An evaluation of the scope of work presented; and
- The degree to which the Eligible Project meets the goals and priorities of the SHCFTP IV and

- the objectives and requirements of the RFA; and
- Knowledge of regional or community needs; and
- The appropriateness of the expenses to the Eligible Project; and
- The amount necessary to achieve the goals of the Eligible Applicant’s overall transformation activities.

Other Information about Award Determinations:

- The amount of project requests is expected to significantly exceed available funds.
- SHCFTP IV does not require applicants to provide matching funds. However, if an applicant chooses to identify matching funds in support of the full project cost, and the Eligible Project receives a SHCFTP award, a condition of that award will be that all funding sources for the project are verified as available to fund the project.
- However, given that an evaluation criterion is “the extent to which the Eligible Applicant has limited access to alternative financing” and recognizing that the value of project requests is expected to significantly exceed available funds, the capability of an applicant to access debt or institutional funds for all or a portion of the project costs will be an award consideration.

Applicants are hereby advised that, in accordance with Public Health Law 2825-g and Chapter 54 of the Laws of 2022, awards made under this RFA are determined on a non-competitive, discretionary basis. Funding will be awarded at the discretion of the Commissioner of Health and approval of the Director of the Division of the Budget for purposes described in this RFA. Without limitation to this authorization, the Commissioner of Health may consult with the Director of the Division of the Budget, DASNY, NYSDOH and DASNY professional staff, and any other internal or external experts or local health care constituents as appropriate from time to time and/or at any time in the evaluation of applications received pursuant to this RFA. The decision to award, or not to award, or to award a grant at a funding level that is less than the amount requested by the applicant, is discretionary and cannot be appealed.

As these awards are discretionary, there is no right of appeal and the decision of the Commissioner of Health, and the Director of the Division of the Budget is final. As such, applicants are advised to put forward their best efforts in thoroughly completing and fulfilling all the requirements of the RFA.

The decision not to fund an application will be communicated by letter. Based on the number of applicants, NYSDOH shall have the sole discretion of whether or not to provide an opportunity for non-successful applicants to request a debriefing to be conducted after the announcement of awards. Comparisons with other grant applications will not be made during a debriefing.

NYSDOH’s determination of applicable terms and conditions of award or a denial of a request to change the terms and conditions is discretionary and not subject to appeal.

VI. Attachments

Please note that certain attachments are accessed under the “Pre-Submission Uploads” section of an online application and are not included in the RFA document. In order to access the online application and other required documents such as the attachments, prospective applicants must be registered and logged into the NYS Grants Gateway in the user role of either a “Grantee” or a “Grantee Contract Signatory”.

- Attachment 1: Application Cover Sheet*
- Attachment 2: Projected Financial Information*
- Attachment 3: Vendor Responsibility Attestation*
- Attachment 4: Minority & Women-Owned Business Enterprise Requirement Forms*
- Attachment 5: Service-Disabled Veteran Owned Business Requirement Forms*
- Attachment 6: Required Proof of Minimum Eligibility*
- Attachment 7: IT Questionnaire*
- Attachment 8: Required 2022 IRS 990 Form*
- Attachment 9: Required Audited Financial Statements*
- Attachment 10: Statewide Health Care Facility Transformation Program IV Statute (Section 2825-g of PHL)

*These attachments are located/included in the Pre-Submission Upload section of the Grants Gateway online application.