

Community-Based Primary-Care Clinic Grant Program Application Guidance

Program Purpose

State general funds are provided to assist in the development and operation of clinics that focus on improving access to health care with an emphasis on community-based services and reducing health disparities for underserved populations. Grant funds are intended to make primary medical and dental care, prescription drugs, and preventive health care services accessible and affordable to underserved Kansas residents, including uninsured individuals and those enrolled in public insurance programs with eligibility based on income that are operated by the state of Kansas and/or federal government (HealthWave/Medicaid).

Eligibility: Clinics applying for state Community-Based Primary Care Grant Program funding must serve as “safety net” clinics in their communities.

Applicant clinics must be not-for-profit or publicly-funded clinics providing at least primary medical and/or dental care services (or planning to provide at least primary care medical and/or dental services for clinics not yet in operation). Only clinics that are working toward becoming a patient-centered medical and/or dental home for their patients are eligible for funding. Funded projects must have a policy of non-discrimination in the provision of health care services, including *but not limited to* race, ethnicity, religion, or national origin.

Clinics must provide services in their service area regardless of ability to pay, including a discounted fee schedule (sliding scale) with reasonable charges for uninsured individuals below 200 percent of the federal poverty level. The discounted fee schedule must be in writing, and information must be publicly posted to ensure that patients are aware of its availability. Patients below 100 percent of the federal poverty level should be charged only a nominal fee or receive free care. Patients above 200% of the federal poverty level may be charged the full fee for services. Information on developing a discount fee schedule is available at the following website:

<http://nhsc.hrsa.gov/sites/becomenhscapprovedsite/eligibility/discountfeeschedule/feescheduleform.pdf>

Kansas statute (65-1648) requires that the distribution and control of prescription medications at indigent health care clinics and federally qualified health centers occur under the supervision of a pharmacist in charge. Information about these requirements and the necessary forms and materials can be obtained from the Kansas State Board of Pharmacy.

Funding Information

Applicants for the Community-Based Primary Care Grant Program are required to provide support that meets the match requirement of one dollar for each one dollar of state funding awarded through this program. This match may come from non-cash donation, in-kind services, or clinic expenditures.

Awards are contingent upon the availability of funding. Geographic considerations may be taken into account when making award decisions.

Funding decisions will take into account the following three areas:

- Local Community—Community need and collaboration among local resources;
- Clinic Overview—High-quality and comprehensive provision of care; and
- Clinic Response—Sound proposal to meet community need.

Primary Care Clinic Program funding may be used for salaries, contracted professionals and services, utilities, and supplies. Funding areas include general primary care, prescription assistance, and dental assistance. This application process is for all three funding areas.

General Primary Care funding may be used to provide access to medical, dental, or other health-related services for clinic patients.

Prescription Assistance funding may be used to provide access to pharmaceuticals and pharmaceutical supplies for clinic patients.

Dental Assistance funding may be used to provide access to dental services for clinic patients.

Funding may not be used to purchase capital equipment or other capital expenditures.

Fiscal control and fund accounting procedures must exist to assure the proper disbursement and accounting of funds for the state community-based primary care clinic grant. Bookkeeping accounts should be established and maintained reflecting all services, charges, receipts, obligations, and revenue, including non-cash contributions and disbursement of grants and local funds. The applicant is fully responsible for providing workers' compensation, unemployment insurance, and Social Security coverage. The applicant is also responsible for income tax deductions and for providing any benefits required by law for those employees who are employed using community-based primary care clinic grant funds.

A yearly audit of the clinic's operations by an outside entity is strongly encouraged. All clinics receiving state funds must at minimum have a fiscal report performed by an outside fiscal entity at the end of each grant year. Clinics must submit a copy of this fiscal report or audit with auditor's management letter and clinic response to KDHE within twelve months of the end of the fiscal year.

Additional program and/or revised budget information may be requested after funds are awarded and prior to issuance of the contract to ensure that all KDHE requirements are met.

Application Information

New applicants: Clinics that have not previously received state Community-Based Primary Care Grant Program funding are required to contact the Primary Care Office prior to **February 15, 2011** to indicate their intent to apply at 785-296-3135 or agerman@kdheks.gov and to have application materials sent to them.

Application Documents: The following should be completed and submitted electronically:

1. Application for Grant
2. Program Request (General Primary Care, Dental Assistance, Prescription Assistance)
3. Application Budget
4. Program Narrative
5. Written Agreements and Letters of Support
6. Supplementary Materials (signed bylaws; current board membership; most recent audit or fiscal report and auditor's management letter; schedule of discounts and sample charges)

Items 1, 2, and 3 above must be completed by all clinics.

Item 4 must also be completed by all clinics. A copy will be returned to the clinic for revision/updating.

A list of items 5 and 6 that are on file at KDHE will be sent to clinics. All new or updated written agreements, letters of support, and supplementary materials should be scanned and submitted electronically with the rest of the application materials or faxed to Angela German at 785-296-1231.

Submission of Application Materials: Clinics that have previously applied for a Community-Based Primary Care grant will have their application materials returned to them prior to January 15, 2012. All application materials must be filed electronically.

Please submit the following grant application materials to Angela German at agerman@kdheks.gov.

- Grant Application form
- Program Request forms
- Application Budget
- Program Narrative
- Any new written agreements
- Any new letters of support
- Signed bylaws (if they have been revised since last year)
- A current board membership list (if changed from last year)
- Clinic's most recent audit or fiscal report and auditor's management letter
- Schedule of discount and sample charge (if revised from last year)

Application deadline: Applications must be submitted electronically by Thursday, **March 15, 2012**.

Use of data in the application process: Data for calendar year 2011 will be used in determining grant awards. Clinics that currently receive Community-Based Primary Care Grant Program funding (SFY 2011) must submit data through the online DataCounts Clinic Reporting Tool (CRT) to be in compliance with their SFY 2012 grant.

It is important to provide the requested data according to the standards and definitions outlined in the CRT User Manual, available on the DataCounts CRT website. Clinics should strive to provide all of the requested data. If the clinic is not able to do so, it should be noted in the appropriate area of the CRT and reported to the Kansas Association for the Medically Underserved.

Clinics that have not previously received Community-Based Primary Care Grant Program funding and that do not currently submit data through the online DataCounts CRT should discuss this when they contact the Primary Care Office to discuss applying for funding as a new applicant.

Application Forms

1. Guidance on Application for Grant

You will need to print this form so that it can be signed by the president or chairperson of the clinic's board and by the clinic's director. Please scan this form and submit it with your complete application or fax it to 785-296-1231.

In response to question, "Where will program be conducted?" please list all locations (sites) where funded clinic activities will occur (if clinic services are provided in more than one location).

In response to "Application Checklist," please indicate Program Request and Detailed Budget unless you are a health department.

In response to "GRANT FUNDS REQUESTED" please indicate an amount requested for: General Primary Care, Prescription Assistance, and Dental Assistance.

This form must be signed by the president, chairman, or director of the governing board or agency and the administrator or director of the applying clinic.

Only those entities that are applying for other funding distributed through the KDHE Aid to Local process will need to complete the Personnel Allocation by Program form.

2. Guidance on Program Request

Submit one form for each funding category in which the applicant is requesting funding (one for General Primary Care, one for Prescription Assistance, and one for Dental Assistance if applying for funding in all three areas). These forms should serve as a summary of the clinic's request in each funding category.

3. Guidance on Application Budget

Please refer to the separate document containing instructions for the application budget form.

4. Guidance on Program Narrative

The narrative includes three sections: **Local Community, Clinic Overview, and Response.** Sections A and B of the narrative will be returned for updates/revisions to the clinics that have previously applied. Section C will need to be newly completed by all clinics. In order to reduce the duplication of answers, please read all questions before completing the narrative.

5. Guidance on Written Agreements and Letters of Support

Previously submitted written agreements and letters of support have been kept on file for distribution to reviewers. A list of the items on file will be sent out with application information. Clinics need to submit only new written agreements or letters of support as part of their application. Clinics should have a written memorandum of agreement and/or letter of support on file with each partner agency that contributes significant non-cash donations or in-kind services. Please scan and submit copies of all relevant agreements and/or letters, which have not been previously submitted to KDHE, with this grant application or fax copies to 785-296-1231.

6. Guidance on Supplementary Materials

Please submit any new or modified documents from the list below:

- a. A copy of the clinic's signed bylaws and current board membership. Previously submitted bylaws only need to be resubmitted if they have been revised or changed.
- b. A copy of the clinic's most recent audit or fiscal report performed by an outside fiscal entity. Include the auditor's management letter and the clinic's response, if any.
- c. A copy of the clinic's schedule of discounts and sample charges and their reductions under this schedule for routine appointments and clinic services. Previously submitted schedule of discounts and sample charges only need to be resubmitted if they have been revised or changed.
- d. Any other supplementary materials which would be helpful for reviewers. These materials should be referenced in the appropriate area of the narrative.

Grant Evaluation and Review

Applications are evaluated for completeness by Primary Care Office staff. An objective review committee then evaluates each grant application and provides recommendations regarding grant awards. Recommendations are based upon each clinic's submitted application and its annual data submission (DataCounts CRT). The objective review committee will be made up of representatives of the Kansas Department of Health and Environment, other state agencies, stakeholder organizations, and other experts who do not have a vested interest in any applicant organization. After the objective review committee makes its recommendations, they are submitted to the Secretary of Health and Environment.

Scoring of Applications

The objective review committee will score the applications in the following way:

Local Community *Total-20 points*
Narrative (20 points)

Clinic Overview *Total-50 points*
Narrative (30 points)
Clinic Data (20 points)

Response *Total-30 points*
Narrative (30 points)

While there are no points awarded specifically for the Application Budget, it will be assessed by PCO staff to ensure compliance with program guidelines.

Reporting Requirements

Instructions and forms are contained in separate materials that will be provided after grant awards have been made.

Program Contact

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