

## Minnesota Accountable Health Model – SIM Minnesota



The following questions on the Practice Transformation Grant program were compiled from the informational webinar on Tuesday, May 19, 2015 and an online questionnaire system. Staff at the Minnesota Department of Health and Department of Human Services prepared answers to questions.

Date	Question or Comment	Response
5/19/15	Would a project that meets goals of the grant but does not result in HCH status or lead to work within an ACO like model be a) eligible and b) likely to be competitive?	Priority is to support the HCH standards. Goal of the grant is integration of care models that include primary care, behavioral health and social services. HCH standards are specific to HCH and are applicable to many of care integrated settings.
5/19/15	When you send out the PowerPoint to attendees - will you also send out the RFP?	Yes
5/19/15	Would an organization that received funding for the previous practice transformation grant be eligible for this grant?	Yes, organizations that have received funding in the first grant cycle are eligible to apply for this grant.
5/19/15	Budget question - do we need to provide a full project budget, with specifics if the grant will cover only a portion of the entire project budget - or do you simply need the information about what the grant will cover?	Budget should be submitted only for the grant specific funds to be used for the project.
5/19/15	Can you further define "a group of primary care providers" as eligible applicants? Can they all be part of a single health care organization?	If a practice has 2-3 clinicians or clinic sites the group would be eligible.
5/19/15	Is child care an approved expense for Sim Grants?	No, child care is not an allowed expense; and incentives for consumers are also an unallowable expense.
5/19/15	Is the 2 year budget from the start date of the grant with the grant only accounting for the first 9 months of funding?	The grant funding is for 9 months. CMMI requires budgets crossing over a calendar year be submitted for each individual year. Year 1 is the first 4 months of September 1-December 31, 2015; year 2, January 1, 2016 – May 31, 2016.
5/19/15	Could these grant funds be used to assist with behavioral health home implementation given the recent delay in its timeline?	Yes, behavioral health is eligible.

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5/19/15	During the webinar it was stated there would be a second RFP in October, 2015. What is the total dollar amount for this round?	The estimated total dollar amount is \$250,000.
5/20/15	Our rural health clinic is attached to a Critical Access Hospital, which one would be considered the applicant agency? We are currently without a CEO, could the director of the applicant agency be defined as the acting CEO or can I list myself as the clinic manager?	If both agencies are eligible to receive a state grant, either one could be the applicant. The person authorized to enter into a legal contract with the state should be listed as the director of the agency.
5/20/15	When referring to a Practice Facilitator, would we list any resource we would be working with? Example: nurse planner with MDH Health Care Homes?	The HCH nurse planners can provide support and technical assistance. They are not practice facilitators. They can however, assist in moving a clinic towards utilizing a practice facilitator.
5/21/15	We are uncertain whether the scope and duration of our clinic services would qualify us as a primary care provider that would be eligible for a grant to improve coordination with the other services we offer. We operate a medical clinic that provides relatively short term, primary care services to children and young adults while they are receiving services in emergency shelter and behavioral health programs we operate. Primary care services typically include well child check-ups, care for acute health concerns, follow-up care for chronic health conditions, and referrals as needed to specialty care providers. Our clinic is staffed by a nurse practitioner and an MD, and we also have a psychiatrist who works directly with our youth in residential treatment programming. The children and youth served in our clinic typically receive services for up to two years. What is the specific definition of a “primary care provider” that is eligible under the grant and would the above clinic services qualify us as a primary care provider?	You would be considered a primary care provider. Primary care provides basic family practice services and refers to specialists for specific conditions.
5/21/15	Does a Practice Transformation grant require an identified primary care provider as a partner in the project, or can a social services agency that provides health care services to its clients apply for a practice transformation grant so that it can improve internal coordination of nursing/medical care and social services but without having a specified primary care partner?	No, you do not need to partner with a primary care provider as a partner. You can apply as a social service agency that provides health care services to its clients.