

Questions and Answers
Statewide Health Care Facility Transformation Program IV and V-Health Information Technology, Cybersecurity, and Telehealth Transformation
RFA #20258 / Grants Gateway # DOH01-SHCFTT-2024

Q#	Question	Answer
1	If our project fits primarily in Health Management Tools, but part of it could also fit under the Telehealth category, which category should I choose when I submit this proposal?	In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories.
2	I have been reading the RFA over for this grant, and I cannot find a minimum or maximum grant request information. Is this a first come first serve basis? Or is there any guidance on min/max requests?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount. This is not a first come first serve application.
3	Can expenses incurred prior to October 1, 2024 be reimbursed as a part of this award? (section 3, subsection B, final paragraph)	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement.
4	Are capital items with a multi-year contract for software subscription eligible expenses? (Section 3)	No, recurring software costs included in multi-year contract are typically not bondable expenses.
5	Are cloud-based services, such as BD/DR, covered beyond the day of go live? (Section 3)	Per Section III. B. only expenses prior to go-live are eligible for reimbursement. Go-live is defined as the point in time where the system is operational and is being used to support healthcare operations.
6	Can you define more thoroughly "post go-live" and "prior to go-live" in terms of eligibility? (Section 3)	Per Section III. B. only expenses prior to go-live are eligible for reimbursement. Go-live is defined as the point in time where the system is operational and is being used to support healthcare operations.
7	Are consulting and configuration services eligible expenses? (Section 3)	Consulting expenses are eligible for reimbursement as long as they meet the requirements laid out in the RFA including but not limited to Section III.B.
8	Is attachment 4 form #4 supposed to be completed multiple times by each M/WBE we expect to contract with and submitted or one completed and submitted by the grantee for all working on the project? (Attachment 4, page 8 & 9)	MWBE Attachment #4 Form #4 can be one form completed by applicant as long as it is taking into account all working on the project for this procurement.
9	Does the Eligible Applicant have to be a healthcare provider?	This RFA is intended to facilitate health care transformation activities. Eligible Applicants must be a provider organization as described in RFA Section II. Who May Apply.
10	Seeking confirmation allowable costs include Workforce orientation to new technologies and supportive workforce redesign as implementation of new technologies are dependent on investment in the workforce to optimize their use and deliver on the expected goals	No. training end users and other support staff costs - even if prior to 'go-live' is not bondable.
11	We are seeking confirmation that the role of the IPA in this situation supports eligibility for funding.	The RFA has been amended. An IPA would be an eligible Applicant. See Addendum#1.
12	Can an IPA provider submit their own separate application as an Eligible Applicant and/or be included in another application as a collaborative partner?	Yes.
13	What priority health management tools has in this RFP if capital funding is being prioritized and many of the costs are associated with development and implementation of data analytical capabilities, data informed quality improvement, and change management to support the referenced goals of "streamlined clinician workflows", "improving clinical decision support", "support workforce needs", and "identifying gaps in care to support improvements in quality and patient engagement".	There is no predetermined priority/amount per category. The total amount of funding awarded will depend on the quality of applications and potential improvement to the health care system, both in total and per category.
14	We are seeking clarification on a) amount of total funding available; b) amount of funding to be directed towards capital; c) additional clarification of non-capital allowable, eligible expenses in support of meeting the goals of Health Management Tools.	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA, the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. \$400 million of the available funding is capital. \$250 million of the available funding is non-capital.
15	Will the non-capital allowable, eligible expenses include: implementing applications that aggregate clinical and administrative data to support the provision of care, improve patient outcomes, and/or support participation of providers in value-based contracting. Tools may support understanding/controlling total cost of care, identifying gaps in care to support improvements in quality and patient engagement. Tools may support remote patient monitoring to improve health outcomes.	Expenses in these areas may be eligible for capital or non-capital funds contingent on the requested expenses meeting all other RFA requirements.
16	Will the non-capital allowable, eligible expenses include: enhance electronic medical records (EMRs) to support workforce needs via streamlined clinician workflows	Expenses in these areas may be eligible for capital or non-capital funds contingent on the requested expenses meeting all other RFA requirements.
17	Will the non-capital allowable, eligible expenses include: Providing or improving clinical decision support; and other investments that boost provider productivity, monitor outcomes and participation in value-based contracting	Expenses in these areas may be eligible for capital or non-capital funds contingent on the requested expenses meeting all other RFA requirements.
18	Will the non-capital allowable, eligible expenses include: Enhance patient experience via streamlined patient intake and discharge tools	Expenses in these areas may be eligible for capital or non-capital funds contingent on the requested expenses meeting all other RFA requirements.
19	Project Management Expenses – seeking to confirm this includes a designated project leader who is employed by the applicant with defined responsibility for development and implementation. Seeking confirmation of project manager through sign off go-live.	Employee salaries and benefits are listed as Excluded Expenditures in RFA Section III B.
20	Seeking confirmation allowable costs include development, redesign of workflows in support of the new enabling technology and related orientation of staff so the redesign is successful.	Expenses in these areas may be eligible for capital or non-capital funds contingent on the requested expenses meeting all other RFA requirements.
21	Seeking confirmation allowable costs include Use of dedicated inhouse staff in support of project design, development, workforce redesign	Employee salaries and benefits are listed as Excluded Expenditures in RFA Section III B.

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22	Maximum Grant Amount: Could you please provide information on the maximum amount we are eligible to request for our proposed project? Understanding the funding parameters will help us tailor our application accordingly.	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
23	Grant Span and Project Duration: We have noted that the grant has a span of 5 years. Could you clarify whether our proposed program must extend throughout the entire 5-year period, or if there is flexibility in the duration? Specifically, are we allowed to receive the entire grant amount upfront if our project requires immediate funding, or does it need to be disbursed over the 5-year period?	The project period does not have to cover the entire 5 years. Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Any obligations assumed by the contractor prior to execution of the contract are assumed at risk.
24	Is there a grant specific to upgrading of software , where by we can do all our financials, budgeting and such on the cloud and create dashboards? Would a grant include hiring an IT specialist who can help with the implementation?	Upgrading software could be eligible contingent on the requested expenses meeting all other RFA requirements. Supplementing staff is a disallowed expense however IT consulting services would be an eligible expense contingent on the requested expenses meeting all other RFA requirements.
25	Regarding the Statewide Health Care Facility Transformation Program IV and V, is there a minimum or maximum award request amount?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
26	Could you better define what you mean by "health" in the priority funding area "population health management tools"? We seek to develop a training platform to provide services such as training for dental students, assisting caregivers In supporting people with IDD in having successful doctors' visits, (training and the development of social stories), curriculum and online training/support for pediatrician students, and first responder training?	For the purpose of this RFA, these tools are intended to impact the current delivery systems for health care services, they are not intended for training.
27	The RFA references an example of an eligible expense as "Software licenses only if a one-time expense with a term of at least three years." Would the license fee be considered acceptable if requested for the full five-year grant period? (Section III, Paragraph B, Page 8 of the RFP.)	A 5 year term would be appropriate, however, the expense would have to meet the other criteria, including but not limited to, Section III.
28	If a provider like us needs to cover the upfront, one-time expense for multiple years of software licenses, and the cost is in the high six-figure or low seven-figure range, is it acceptable to obtain financing (e.g., a bridge loan) to cover the upfront costs? If so, would the interest be grant-eligible?	Yes. However, application budgets should not include interest.
29	Please confirm whether staff salaries and benefits specifically tied to planning, system/application design and development for an eligible project prior to the "Go-Live" date are eligible expenses.	Employee salaries and benefits are listed as excluded expenditures in Section III. B. of the RFA.
30	Is there a limit to the extent to which these projects can overlap? For example, if the primary project is the EHR, can an applicant also include all directly related cybersecurity activities, even if the funding ends of being 50% EHR and 50% cybersecurity?	There is no limit. In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories.
31	If the eligible applicant, who is one of many subsidiaries of a parent organization, proposes a project in Component 3. Population Health Management Tools, is it allowable that the project also benefits the full network of organizations under the parent?	Yes.
32	We understand a detailed budget justification needs to be submitted (based on note in Attachment 2, Tab 2-Use of Funds). However, this note also states that the justification should be no more than 5 pages and 12-point font and is to be uploaded as a PDF. Where does this get uploaded? There is no space to do so in Program Specific Questions, Section 5 Project Budget or in the Pre-Submission Uploads section.	Please upload to the Grants Gateway, under Grantee Document Folder which is found in the File Folders section of the Forms Menu, right below the Pre-submission Uploads. See Addendum #1.
33	For this RFA, there is no information listed in the RFA document on the total available funding, funding amount per award, total number of awards, or if there is any sort of limit to a budget that we can submit. Could you please provide any information on the funding available for this opportunity, and if there is a cap or limit per application?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
34	I was reviewing the following RFA and wanted to inquire on the Evaluation Criteria/Scoring for this grant	The Evaluation Criteria is listed in RFA Section III. C.
35	A quick question related to this Grant Opportunity, what is the total funding available?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
36	Can you further clarify/define community-based organizations that are eligible to apply? Are the community-based programs funded by the listed entities required to be licensed to be eligible?	Community based organizations are not required to be licensed to be eligible. Community based organizations are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements.
37	Could you please clarify how much funding is available to support this RFP?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
38	The RFA indicates that applicants must choose one of the four project categories. How should applicants make this choice if elements of our project aligns with more than one category?	In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories.
39	Is it acceptable for an application to cover more than one project category, in scope, even as one category is identified in the application?	Yes

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40	The RFA indicates that applicants should identify the eligible program for which funding is being requested, based upon the provider eligibility parameters. Can a project support both community-based programs funded by OMH and community-based programs funded by OPWDD, all run by the same provider organization?	Yes
41	If we have more than one eligible program as the beneficiary for our project, how should we present this in our application?	You may submit an application from one lead Applicant benefitting multiple other organizations. The lead Applicant would answer on their organization only. The lead Applicant should upload letters of support from each partnering organization to the Grantee Document folder in the Grants Gateway. The Department reserves the right to require additional information from other organizations at a later time. See Addendum #1.
42	Is it acceptable for a project to have multiple components, such as client-support technology for two or three programs, along with health information enhancements for two different programs?	Yes.
43	Will staff/personnel costs be acceptable expense for a technology application? Example: hiring a CIO to oversee the project?	Employee salaries and benefits are listed as Excluded Expenditures in RFA Section III B.
44	Are there are minimum or maximum limits to the funding for this grant?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
45	The landlord of the building uses certain vendors for construction. If the applicant wins the grant, they would have to use these vendors and perhaps would not be able to meet the MWBE requirements. Is that allowable?	If you cannot meet the goal established, you would apply for a waiver by submitting Form # 2 Waiver with accompanying Good-faith efforts and/or justification documentation which would be fully reviewed/assessed by the DOH MWBE Unit for determination.
46	If the project only takes a year or 18 months are there budget limitations per year?	There are no additional budget limitations placed on contracts based on their term.
47	If construction started 10/1, could these expenses be reimbursed by the grant? If not, when can the project begin and be eligible for grant reimbursement?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement.
48	Can you please tell me how much is available in this section of funding?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
49	Are for-profit OASAS article 32 agencies allowed to apply for this grant? This is inpatient substance use facility.	No, text has been added to the RFA to clarify this opportunity is limited to not-for-profit organizations. Please see Addendum #1.
50	Under section H3, the RFP states the Grantee will be required to submit a quarterly report that includes a summary of public engagement and public comments received. Is this applicable to all proposed projects? For example, how would this fit into an Electronic Health Records proposal that includes EHR optimization, consolidating infrastructure, improving revenue cycle management, etc.? Would an EHR RFP process be sufficient?	Yes this section of the quarterly report is a requirement of app proposed projects. However, the section does not require periodic public engagement and comment - If an awardee does engage with the public on the project, or receives public comments on the project, those should be summarized in the quarterly report.
51	Question 4d (under the Identified Community Need section) on the application states "Demonstrate the extent to which the Eligible Applicant has engaged the community affected by the Eligible Project and the manner in which community engagement has shaped the Eligible Project. Identify the specific stakeholder, patient, family, or other community groups that were contacted and the manner in which they were engaged (meeting, town hall forum, etc.) and how their feedback was incorporated into the Eligible Project." Is this applicable for all proposed projects? For example, how would this apply to EHR optimization, consolidating infrastructure, improving revenue cycle management, etc.	Yes. The Applicant should use its discretion to identify and engage the stakeholder community most applicable to its proposal.
52	If our vendors will be identified and confirmed during the grant period, do we need to complete the MWBE and SDVOB forms with names of vendors or can we revise updated vendor information and staffing details once confirmed?	Please complete the required MWBE/SDVOB forms to the best of your ability. The identified vendors and amounts will be reviewed and confirmed by the DOH MWBE unit.
53	Is there any distinction between what entities would be considered a subcontractor or vendor?	The Prime (Grantee / Eligible Applicant) would be the lead organization on the grant application. The subcontractor for purposes of this RFA would be an entity that is providing a service and/or commodity to the Prime (Grantee/ Eligible Applicant).
54	I am unable to apply for the grant opportunity, I am only able to view at this time. We have applied for each of the other rounds without a problem. Can you tell me if this is a known issue for other government entities or should I contact grants gateway help desk?	Please contact the Grants Gateway Help Desk.
55	Please verify amount of funding available for this round.	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
56	How much funding is available under this RFA? Of the funding available, how much of it is for capital?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. Roughly \$400 million of the available funding is currently structured as capital.
57	Is there a minimum, maximum, and/or preferred price range per project?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
58	Will SFS be used in this application process, or will it be managed completely in Grants Gateway?	Applications must be submitted using the Grants Gateway. Per RFA Section IV. M, SFS may be used in some cases for prequalification purposes.
59	What is the total number of awards that will be given?	There is no minimum or maximum number of successful applicants that are anticipated to receive awards.

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60	Is there an award amount range or max that we should be considering when building a budget?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
61	Under Section III : Project Narrative/Workplan Outcomes, Subsection B: Eligible and Excluded Expenses and Disallowed Costs, Paragraph 3, Bullet 1 on Page 8: a. Can the use of a consultant be permitted for the entirety of the project, not just for strategic plans, security frameworks, or planned system enhancements?	Yes, contingent on the requested expenses meeting all other RFA requirements especially that they are incurred prior to go-live of the enhanced system.
62	What is the administration allocation percentage?	Employee salary and benefits are not allowable expenses, therefore an indirect percentage would not be applicable.
63	Can you please tell me if PACE organizations (Program for all-inclusive care for the Elderly) may also apply?	PACE organizations are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
64	For the purposes of this funding, will the applicant need to lay out the funding and begin their capital project prior to receiving any approval of their project funding? Or will the project approval process occur and then allow for the applicant to start their capital project and submit for reimbursement?	No, the Applicant would not have to begin their capital project prior to receiving approval of their project funding.
65	Is there a minimum or maximum on grant size per year and per project?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
66	What are the formatting requirements? Is there a page limit for applications? Do you have a recommended page count for the program specific questions?	Applications must be submitted using the Grants Gateway which institutes character limits.
67	In reviewing the RFP I cannot find any information on what the expected grant range amount is for this RFP. Will you please let us know what range you expect the grants in this project to be?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
68	We were wondering how much could be awarded to the chosen applicant? Is there a range?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
69	We are applying for the Statewide Health Care Facility Transformation Program IV and V Health Information Technology, Cybersecurity, and Telehealth Transformation grant; and were wondering how much money is awarded?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
70	Attachment 6, page 1 questions 1-4, is there a word/character limit to the responses?	No however the responses should kept concise.
71	Please confirm the total available funding for RFA #20258	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
72	Our organization is an eligible applicant with article 31 and article 32 licensed behavioral health programs. We also operate a substantial number of housing programs that serve individuals with behavioral health conditions. Given the current recognition of the importance of Health Related Social Needs to positive outcomes for an individual's health, as evidenced by the recently approved 1115 Demonstration Waiver, would an application for a case management system that collected and integrated essential housing data with other sources of medical information be considered eligible for funding?	Case management and care coordination would be outside of the scope of this RFA, which is intended for treating providers.
73	Would a Financial System to support our services and billing qualify under one of the four required categories of (i) Electronic Health Records, (ii) Cybersecurity, (iii) Health Management Tools, or (iv) Telehealth?	Potentially, depending on the types of services and the specific functions of the system.
74	NIST- do we have to be fully compliant to their standards?	It is not a requirement that Applicants be fully compliant to NIST standards. Activities funded by this RFA should meet and/or support security controls that are comparable to NIST standards.
75	What is the maximum allowable grant request?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
76	How many grants does the state foresee distributing ?	There is no minimum or maximum number of successful applicants that are anticipated to receive awards.
77	Can we add staff FTE to the budget?	Employee salaries and benefits are listed as Excluded Expenditures in RFA Section III B.
78	Can we apply for both the application cost and the implementation costs?	Costs for preparing the application in response to this RFA would not be eligible expenses. Criteria for eligible expenses of a purchased system/application and its implementation are outlined in Section III B.
79	If granted, would we be able to hold a planning period of 18 months and begin implementation after the 18-month mark.	Yes but expenses eligible for reimbursement must meet the criteria outlined in Section III. B. of the RFA.
80	Can we apply for software as a service (ex. are applications such as Palo Alto, Zscaler, DarkTrace, Fortigate, QualysGuard, Microsoft E5 with full cybersecurity suite eligible?)	Software services are typically not bondable expenses.

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81	Is software licensing expense eligible (Microsoft E5 with full cybersecurity suite licensing applicable for this opportunity)? a. If we are already using the Microsoft system and would like to expand, would all Microsoft costs be eligible during the grant award period.	Software is an eligible expense only if a one-time expense incurred prior to “go-live” and if used to develop the capital asset (and license does not extend past “go-live”); or, software licenses are a one-time expense with a term of at least three years. Specific to this example, only costs associated with expansion would be eligible.
82	Can the grant be used to buy laptops for all staff agency-wide?	Items eligible for reimbursement must meet the criteria outlined in Section III. B. of the RFA.
83	Can the grant be used for infrastructure costs such as updating access and core switches	Yes, contingent on the requested expenses meeting all other RFA requirements.
84	Could this grant cover the migration costs for moving our software to the cloud.	Yes, contingent on the requested expenses meeting all other RFA requirements.
85	Would the cost of a security audit conducted by a consultant be an eligible expense, and would the following elements of such an audit be eligible expenses: •Assessment of our IT infrastructure; •Assessment of our security processes; •Assessment of our software; •Assessment of our network device configurations; •Conducting a penetration test of our IT environment; and •Preparation of a report including a written plan for addressing any findings?	Yes, contingent on the requested expenses meeting all other RFA requirements especially that they are incurred prior to go-live of the enhanced system.
86	Would the cost of implementation of the written plan for addressing findings from the security audit be an eligible expense?	Yes, contingent on the requested expenses meeting all other RFA requirements especially that they are incurred prior to go-live of the enhanced system.
87	Would the cost of obtaining a HITRUST CSF Certification or its equivalent be an eligible expense?	Yes, contingent on the requested expenses meeting all other RFA requirements.
88	Would the cost of maintaining certification during the grant period, including any software subscriptions, be an eligible expense?	No.
89	Regarding the infrastructure component, does this only apply to construction costs associated with the IT component of this project?	No.
90	For expenditures, would mortgage cost be considered unallowable?	Mortgage costs are <u>not</u> allowable.
91	Is it possible to submit one application with our affiliate providers, where we would be the lead applicant?	You may submit an application from one lead Applicant benefitting multiple other organizations. Please see Addendum #1.
92	Regarding Section II. Who May Apply (b) states: Eligible Applicant can be “Community-Based Programs funded under the office for people with developmental disabilities”. Are OPWDD agency providers eligible for this funding if they are in-home service providers defined as providing a broad range of services in the home and tailored to individual needs ranging from respite, training, supervision, to intensive behavioral, health and health related services?	OPWDD agency providers eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
93	Regarding Section II. Who May Apply (b) states: Eligible Applicant can be “Community-Based Programs funded under the office for people with developmental disabilities”. Are OPWDD agency providers eligible for this funding if they are day services/day habilitation providers defined as providing a combination of diagnostic, therapeutic, training and pre-vocational services?	OPWDD agency providers are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
94	Regarding Section II. Who May Apply (b) states: Eligible Applicant can be “Community-Based Programs funded under the office for people with developmental disabilities”. Are OPWDD agency providers required to hold current contracts with Department of Health in order to be eligible for this funding?	No, but all Applicants are required to be a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements.
95	Regarding Section II. Who May Apply (b) states: Eligible Applicant can be “Community-Based Programs funded under the office for people with developmental disabilities”. We are part of a network of seven OPWDD provider agencies (not an IPA). If one affiliate serves the majority of our patient population, is that singular affiliate eligible to apply for Cybersecurity funding on behalf of the entire network of OPWDD providers, to benefit all affiliates?	You may submit an application from one lead Applicant benefitting multiple other organizations. Please see Addendum #1.
96	One of my clients is going to submit an application for the above referenced RFA. Are they allowed to submit an application for telehealth and one for cybersecurity or must they only complete one application per organization?	DOH will only review one application, specific to one project, per Applicant.
97	What is the total amount of funds that will be awarded under this RFA? •Are there specific allotments for different types of eligible applicants – e.g., general hospitals, nursing homes, community-based providers, etc.?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. There are not predetermined amounts for different types of eligible Applicants.
98	May a group of facilities apply for funding for a single project (e.g. a telehealth hub and spoke project; or a group purchase of a health data management tool, a cybersecurity tool, or a remote patient management tool)? How should such an application be structured?	You may submit an application from one lead Applicant benefitting multiple other organizations. The lead Applicant should either be the parent organization or the entity that will own the IT asset.
99	If a provider is planning to a project that will involve both capital improvements in the physical plan and technology investments, should it submit separate applications under SHCFTP IV and SHCFTP IV/V (technology), or should it submit a combined application under SHCFTP IV only?	Eligible Applicants must apply separately to RFA# 20244 if the primary focus of the Eligible Project is not technological and telehealth advancement. Applications to RFA # 20244 can include expenditures in support of technological and telehealth advancement not to exceed 15 percent of the total funds requested for Health Care Facility Transformation Projects.
100	Our Article 28 clinic has a current DASNY grant for capital improvements - renovations and various equipment. It is not through the NICIP opportunity. Is our Article 28 eligible to submit an application to this RFA for eligible costs not funded by our current DASNY grant contract? Or would this be considered “overlapping sources of state funding”?	Eligible Applicants shall not receive awards for duplicative <u>expenditures</u> under both this RFA and any other state or federal opportunity.

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101	Do IDD organizations qualify for implementing a new electronic health record? We signed a contract with Netsmart in 2023 and are planning our Go Live in May/June 2024.	IDD organizations are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
102	Hi I work for a detox acute hospital in PA. we have new York patients come to our facility since we are the closes that provide our services to certain areas of NY. Would we be eligible for the grant or is it for NY facilities only?	This application is intended for organizations physically located within New York.
103	When supporting workforce needs is there a clear delineation within the grant as to where we see the greatest need to supplement the workforce? Under the health management grant, can this grant support supplementing the presence of a clinician in a health care setting utilizing an infrastructure with artificial intelligence? The goal would be to boost provider productivity and enhance patient experience	General ongoing operating costs applicable to day-to-day operations are not eligible expenses but implementation of a system to perform these activities may be eligible contingent on the requested expenses meeting all other RFA requirements especially that they are incurred prior to go-live of the enhanced system.
104	If several A 28 hospitals/health systems in a region are collaborating to build a common EPIC EMR IT platform to allow for max interoperability and data exchange and connection with the SHINY, with one hospital taking on expenditure for the full EPIC design build and other hospitals collaborating and connecting through EPIC's Community connect product, does the DOH recommend that each partner hospital submit separate, individual applications or that the main health system that is designing and building the EPIC EMR platform submit one application, and list the other hospital partners as co-applicants and describe the benefit to patients as well as to each hospital partner?	You may submit an application with one lead facility benefitting multiple locations. Please see Addendum#1.
105	Should the grant for IT investment be where the IT asset will be owned? Or is it preferred to submit separate applications showing the allocation of the cost among the collaborating hospital partners?	You may submit an application from one lead Applicant benefitting multiple other organizations. The lead Applicant should either be the parent organization or the entity that will own the IT asset.
106	Is an entity limited to submitting only 1 application for 1 project category? Or can the same entity submit 1 application for each of the 4 project categories?	DOH will only review one application, specific to one project, per Applicant.
107	Could an entity submit 1 application with multiple projects under the same 1 project category?	In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories. A maximum of 1 project will be funded per applicant.
108	How does the State define "healthcare transformation activities"? Can some examples be provided?	For the purpose of this RFA, this is defined as the activities necessary to impact projects in the four categories.
109	On page 7, the RFA notes that there is greater availability of capital funds as opposed to non-capital funds. Can the State advise what proportion of funds will be set aside for capital versus non-capital expenditure	\$400 million of the available funding is capital. \$250 million of the available funding is non-capital.
110	Will the State provide a template to submit the project budget?3,c,	For the materials with specific formatting requirements, templates/forms have been provided. For the other attached documents, Applicants should use their discretion to determine the format that most clearly demonstrates their plan/proposal.
111	Which not-for-profit applicants are exempt from the prequalification requirement?	There are no prequalification exemptions for not-for-profit Applicants under the January 16, 2024 prequalification policy.
112	Will the funding be disbursed as a lump sum?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement.
113	How long after submission will prequalification be confirmed?	New York State reserves up to 5-10 business days from the receipt of complete Prequalification Applications to conduct its review after which a determination will be made. Organizations are strongly encouraged to submit their Prequalification Applications sufficiently in advance of a grant application deadline to allow for both initial review and any necessary updates and/or revisions.
114	On pg. 25, 1.a. if the entity intends to apply for another grant, does that need to be mentioned?	Yes, in addition to details on any previously submitted applications listed in 1.a., plans to submit an application to any opportunity referenced in the RFA should also be added to 1.b. Indicate the program, applicant name, project name, \$0 awarded, and current status of the project.
115	For 3.c. can this be a third party or does it need to be an employee?	The primary contact should be an employee of the organization.
116	Are Ambulatory Surgery Centers (ASCs) licensed under PHL Article 28 also considered Eligible Applicants, or only Diagnostic & Treatment Centers?	ASCs are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
117	Are "multi-specialty medical groups" considered Eligible Applicants? or only PCP medical groups or multi-specialty IPA's?	Multi-Specialty Medical Groups are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
118	Are individual Community Providers licensed as Specialists also Eligible Applicants if they have a secondary specialty in Internal Medicine or other PCP related specialties?	Individual Community Providers licensed as Specialists are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements.
119	Are licensed "Portable X-ray supplier" or "Independent Diagnostic Facility" considered Eligible Applicants?	Portable X-ray suppliers and Independent Diagnostic Facilities are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
120	Are regular provider practices or group practices eligible to apply?	Provider Practices are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements.
121	Can you please offer us some clarification on whether Grants Gateway or the State Financial System should be used to apply for this opportunity?	Applications must be submitted using the Grants Gateway.

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Q#	Question	Answer
122	Are there specific formatting guidelines or templates you want to see in attached documents, like specific fonts or spacing?	For the materials with specific formatting requirements, templates/forms have been provided. For the other attached documents, Applicants should use their discretion to determine the format that most clearly demonstrates their plan/proposal.
123	How are aspects like “innovation” or “impact” assessed?	They will be assessed using the evaluation criteria included in the RFA.
124	With regard to Impact Assessment, are there any preferred tools or methods for evaluating project outcomes in line with NYSDOH’s strategic goals?	No. Applicants should use their discretion to determine the tools and methods best suited to their proposal.
125	Is an entity like Medpoint eligible to apply for a grant under the above-identified grant opportunity?	Funded organizations must meet the requirements of RFA Section II. Who May Apply.
126	Can multiple software programs be part of the same grant if they fit into more than one of the four categories (Electronic Health Records (EHR), Cybersecurity, Health Management tools, Telehealth), but are necessary for main purpose, e.g. cybersecurity critical for security of electronic health records or educational software critical to training related to EHR? (Introduction, p. 3, listing of categories)	Yes.
127	What if cybersecurity and/or training modules can be obtained as add-ons to EHR software such as Point Click Care? (Introduction, same as #1)	Yes, contingent on the modules meeting all other RFA requirements.
128	Can laptops/pads etc. be part of a proposal if they are part of implementing the new EHR? (Introduction, Same as #1)	Laptops/pads would be considered hardware under Section III.B.
129	In-house personnel are excluded from project management costs. Is there any overhead allowance outside of consultants and/or contractors involved in planning and implementation? Is the cost of a contracted individual for managing and submitting the proposal an eligible expense? (Section III, B, Eligible and Excluded Expenses)	There is no overhead allowance. Costs for preparing the application in response to this RFA would not be eligible expenses. Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Any obligations assumed by the contractor prior to execution of the contract are assumed at risk.
130	Are multiple bids required for products or services being contracted for that are central to the project? If so, what are the guidelines?	Not required but reasonableness of cost should be considered in products or services contracted for and the methods by which they are acquired.
131	Can more than one proposal be submitted for an organization under this RFA? If so, do they need to be prioritized?	DOH will only review one application, specific to one project, per Applicant.
132	Please confirm that an eligible organization can submit applications for BOTH RFA # 20244 and RFA # 20258, provided that the projects are different in scope and will have different expenditures (page 4, paragraph 2).	Applicants can submit separate applications for separate projects and separate resultant expenditures to both RFA # 20244 and RFA # 20258.
133	How many awards are anticipated? Is there a minimum or maximum amount that can be requested? How much capital vs non-capital funds are available? (Pages 4 and 7)	There is no minimum or maximum number of successful applicants that are anticipated to receive awards. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the applicant’s need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
134	Please clarify if in-house project management salaries and fringe are eligible expenditures. Page 7 (Section B) states that the following is eligible: Project management expenses excluding in-house personnel expenses. Page 8 (last section) states the following are not eligible: employee salaries and benefits. Please confirm if the salary for an in-house dedicated project manager are eligible?	Both references to the RFA exclude project management expenses incurred by in-house staff. Salary for an in-house dedicated project manager are <u>not</u> eligible expenses.
135	Can Purchase Orders (POs) for the project be issued prior to the October 1, 2024 grant start date – no expenses would be incurred against the PO until after the October 1, 2024 date?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Any obligations assumed by the contractor prior to execution of the contract are assumed at risk.
136	Regarding Section 5.A.3. D, will salaries of non-clinical employees earning >250,000K remain confidential for purposes of the grant, and can information be redacted for FOIA purposes?	Employee Name does <u>not</u> have to be reported. If multiple employees are in the same title, include the number of employees meeting the salary criteria. Also include employees with clinical credentials and or experience but currently serving in non-clinical titles.
137	Organizational Capacity: 1.Regarding Section 5.A.3.H, cost reports for our organization are not finalized until the end of March 2024. Is it allowable to submit patient admissions/visits information for the 2022 cost reports as an alternative?	Yes
138	3.Regarding Section 5.A.4.A.i, is there a projected target for the number of populations or vulnerable community members that the grant aims to serve, and what factors contribute to determining this number?	No. The Applicant should use its discretion to select targets relevant to the proposed project.
139	4.Regarding Section 5.A.4.A.i, what health status indicators should be prioritized in the community needs assessment, and could you provide further details on this definition or considerations influencing the selection of these indicators?	The Applicant should use its discretion to select indicators relevant to the proposed project.
140	5.Regarding Section 5.A.4.D, are there specific requirements for the stakeholder-informed approach? Can previous years’ community assessments (i.e., 2022) qualify as outreach?	No. The Applicant should use its discretion to select requirements relevant to the proposed project.
141	6.Regarding Section 5.4.A.D is there specific criteria for how applicants should collect stakeholder input (e.g., surveys, focus groups), including requirement on the quantity of stakeholders to be engaged?	No. The Applicant should use its discretion to select stakeholder input relevant to the proposed project.
142	8.Regarding Section 4.G, what is the timeline and process for distributing funds? (e.g., reimbursement schedule, is it based on completed deliverables)	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Reimbursement should be expected 30-60 days after receipt of an approvable voucher. Vouchers submitted with errors and/or insufficient back-up documentation for expenses will experience delays.
143	7.Regarding Section 4.H.3, what key performance metrics and milestones will be expected of the grantee? (e.g., what KPIs will be tracked)	These are to be determined, possibly specific to each individual award.

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Q#	Question	Answer
144	9. Regarding Section 4.A, are there any limitations for Attachments with respect to permissible word count?	Section V.4.A. does not request an attachment. It has a 1000 character limit.
145	13. Regarding Section 5.C.A, what additional criteria will the "Review Team Evaluation Tool" utilize to differentiate between ratings such as "Good," "Acceptable," "Poor," or "Not Responsive," and could you elaborate on the specific parameters or considerations that contribute to assigning these distinct ratings?	Differentiation between the Evaluation Criteria ratings will be at the discretion of the reviewers. Please see Section V.C. Review and Award Process of the RFA for additional details.
146	14. Regarding Section 5.C.A, the application encourages early submission for grantees. Are there advantages to submitting applications early? For example, will early applications receive priority review, evaluation and funding?	Priority will not be given to early submitters. Early submission allows 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.
147	11. Regarding Section 5.C.A, will the \$650M in funding be appropriated equally across the 4 categories (EHR, Cybersecurity, Health Management Tools, Telehealth)? What is the total amount of funds being disbursed per category?	There is no predetermined amount per category. There is no minimum or maximum number of successful applicants that are anticipated to receive awards.
148	15. Regarding Section 5.C.A, is there a deadline for pre-submission material or will this be included in one comprehensive application?	There should be one comprehensive application .
149	10. Regarding Section 5.C.A, can the scope of work be modified after grant application has been approved (e.g., completion of any foundational work for the project in-scope of the grant?)	Yes, there will be a process to evaluate modifications to the scope of work and budget post execution.
150	12. Regarding Section 5.A.7.C, is there a minimum and maximum amount of funds that can be applied for per project or per application?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
151	19. Regarding Section 3.C, is there an established weighting system for sections within the response, and if so, could you provide additional details on the allocation of weights for evaluation, including the criteria or factors influencing the assignment of different weights to specific sections?	Each of the eight evaluation criteria are applied to the whole of the application. See Addendum #1 that removes the language related to weights.
152	If a proposed eligible project covers all four (4) categories to include Electronic Health Records, Cybersecurity, Health Management Tools, and Telehealth, should the eligible applicant apply based on the category the eligible project covers the most, or should four (4) separate applications be submitted to cover each category? (Section 1 – Introduction pg. 3 of 36).	In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories.
153	If the review and decision-making committee agrees that only a portion of an applicant's project is deemed eligible, will there be negotiations to award only the eligible portion of the project, or will there be a decision to void the entire application? (Section F. – Department of Health Rights, item #3 and #11 pg. 14 of 36)	The Department of Health reserves the right to make an award in whole or in part.
154	How will the applications/awards from prior Transformation RFA's play a factor in the determination of an award for RFA #20258?	This information is collected to ensure that Applicants do not receive awards for duplicative expenditures under both this RFA and any other state or federal opportunity.
155	What is the maximum amount an applicant should apply for with this RFA #20258, and is the amount of potentially awarded funds based on the geographical region or the communities being served by an eligible applicant as per the Social Vulnerability Index (SVI)? (Section F. – Department of Health Rights, item #19 pg. 15 of 36)	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. The state reserves the right to consider geographic and SVI considerations as per Section IV. F.
156	For awarded contracts, are funds disbursed via: - I) Up-front total award amount II) Requested advances or III) Reimbursements over periodically incurred costs. (Section G. Term of Contract – pg. 15 of 36).	Contractor will be reimbursed for eligible, actual expenses incurred as allowed in the Contract Budget and Workplan. At the end of the contract period left over funds would be rebudgeted by the Department.
157	My agency is authorized to deliver CFTSS: Children's Mental Health Rehabilitation Services Program, a community based program funded under the office of mental health. Are we eligible to apply?	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 governments are eligible to apply if they are a not-for-profit and both the Applicant and proposed project meet all other RFA requirements.
158	My agency is in the process of closing out an unrelated DASNY project (renovation & upgrades to facilities), are we eligible to apply?	Your organization is eligible to apply if the organization and proposed project meet all other RFA requirements and there are no duplicative expenditures between your proposal and any other state or federal opportunity, including the Statewide Health Care Facility Transformation Program IV (RFA# 20244) and the Nonprofit Infrastructure Capital Investment Program (NICIP) to be administered by DASNY.
159	Is each applicant required to meet 15% MBE and 15% WBE (individually) or 15% M/WBE in combination?	Each Applicant is required to make a good-faith effort to plan to meet 15% MBE and 15% WBE for a total combined effort of 30% for MWBE over the life of a resultant contract.
160	Is there a request for partial or total M/WBE waiver?	Please see MWBE Attachments and Instructions.
161	From page 8 of the RFP, item III. B, my first question relates to this sentence: "Servers, equipment, and hardware provided that it is for purchase and not lease, estimated useful life in excess of three years, and per unit cost is greater than \$250 Question: On what date does the clock start on three years of useful life?	The date of implementation (asset is in service).

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Q#	Question	Answer
162	From page 9 of the RFP, item III. B, my second question relates to this sentence: "Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Any obligations assumed by the contractor prior to execution of the contract are assumed at risk." Question: How long after Grantees submit Vouchers might Grantees expect reimbursement?	Payment should be expected 30-60 days after receipt of an approvable voucher. Vouchers submitted with errors and/or insufficient back-up documentation for expenses will experience delays.
163	Can projects that are focused in one area include some expenses associated with the other categories? (for example Category 3 may require optimization or integration of EHRs)	In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories.
164	Can a single eligible applicant apply for more than one category by submitting separate applications for each category? For example; Facility X, submits 2 separate eligible projects; one in the Cybersecurity Category and one in the Health Management Tools Category?	DOH will only review one application, specific to one project, per Applicant.
165	The RFA states end user training is not eligible, however, what about Train the Trainer Expenses?	Yes: training 'trainers' or admin certifications required by vendors is bondable.
166	Can eligible applicants apply to both RFA# 20258 and RFA# 20244?	Yes
167	What does this mean (i.e. Consulting vendors may sub-contract but we may not know right away.) The RFA specifically talks about "Components of the Scope of Work", however, do we need to be concerned about other Components?	DOH acknowledges the Applicant may not have selected or committed to a vendor at the time of application, however, that expense should be thoughtfully estimated and budgeted as a subcontract expense in the proposed budget. There should not be any expenses other than those incurred carrying out the scope of work.
168	Form of Reimbursement. ROA references Attachment A-1 in the final Grant contract as the way reimbursements should be submitted. Can we get a copy of this now in order to review? Does a category identification requirement exist similar to CRFP?	If tentatively awarded we can provide a copy of the A-1 at that time and/or prior to contract negotiation.
169	Will a dedicated State Liaison be assigned (i.e. Page 15, Item H-2 says reimbursements are sent to a general email address. In this respect, who are follow-ups sent to about reimbursements as well as questions that arise from time to time.	Contact information for the state staff responsible for managing agreements will be provided in the executed contract.
170	In the Projected Financial Information Attachment 2, where should IT FTE Costs and Consulting Costs be recorded? The "Use of Funds" sheet has: (i) Row 23 - Planning Consulting Fees (ii) Row 26 - Other Fees (iii) Row 31 - Other expenses The "Impact - Financial Viability" sheet has: (i) Row 19, item 1. Management & Supervision (ii) Row 20, Item 2. Technician & Specialist (iii) Row 36, item 18. Other (**Specify) (iv) Row 42 - Salaries and Wages (v) Row 43 - Employee Benefits (vi) Row 44 - Professional Fees (vii) Row 49 - Other Direct Expenses	IT FTE Costs - Use of funds sheet: Row 26 and then specifics in the Detail of Expenses. "Impact - Financial Viability" sheet" "Other (**Specify)" and then in the relevant Expenses (in \$) rows. Consulting Costs would be Use of funds sheet: Row 26 and then specifics in the Detail of Expenses. "Impact - Financial Viability" sheet" in the Purchased Services row.
171	Section III B. "Eligible and Excluded Expenses and Disallowed Costs" states that items with a per unit cost less than \$250 are not eligible for funding under this RFA. Would items with a per unit cost less than \$250 be eligible assuming they are part of a system/functional unit of at least \$250, e.g. necessary peripherals for servers?	Itemized expenses less than \$250 would not be eligible.
172	The "IT Questionnaire Part II: Budget Breakout" Implementation Costs line #3 references a five-year useful life for software ("the useful life is not less than 5 years from the placed in service date.") However, Section III B. "Eligible and Excluded Expenses and Disallowed Costs" states that software licenses with a three-year term are eligible. Could the 5-year useful life requirement be clarified?	Generally speaking, license term(s) must be min. of five years. Please note, bondability of software costs is dependent on a variety of factors – including but not limited to: whether the costs are recurring or incurred prior to go-live, whether the costs are associated with a hardware or other bondable project components, etc.
173	Participation Opportunities For New York State Certified Service-Disabled Veteran Owned Businesses. Overall Goal of 6%.	Please see the SDVOB Directory at: https://sdves.ogs.ny.gov/business-search
174	Will applications be reviewed by any automation software? In other words, an ATS (Applicant Tracking System)?	No
175	My question is the following: the agency for whom I work anticipates signing a contract for an Electronic Health Record (EHR) in January 2024. The agency's goals in terms of the EHR are fully aligned with the RFA's goals. The EHR will cover 10 distinct Agency programs, all subject to the RFA requirements. We anticipate starting the work in February 2024 for 2 of the 10 programs. The EHR vendor's work for the other 8 programs can commence after the execution of the RFA contract (if we receive it). Needless to say, the EHR vendor's invoice will detail the work provided under these 8 programs and the dates and amounts incurred. Since the expenses for these 8 programs will only be "incurred" after the start date of the contract, it seems that they would be eligible for reimbursement. I would like to please confirm that the expenses incurred for these 8 programs after the start date of the contract would be eligible for reimbursement under the RFA.	Yes, contingent on the requested expenses meeting all other RFA requirements especially that they are incurred prior to go-live of the enhanced system.

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Q#	Question	Answer
176	RFA pg. 6 Under "Additional notes" – states that "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." Our organization has multiple licensures that meet the eligibility criteria and our proposed Electronic Health Records project would impact each of them. Is it acceptable to include multiple licensures to demonstrate eligibility for a technology project that would align with them?	Yes
177	RFA pg. 15 "G. Term of Contract – expected term is October 1, 2024 through September 30, 2029" We have a phased technology project, the portion of which that we would apply for under this grant may not begin until likely 2025. Is it an expectation that projects begin as soon as the contract period starts or is there some leeway within the contract term when a project can start?	There is leeway with the estimated contract start dates.
178	There is no mention of how much total funding is available in this grant opportunity or minimum/maximum request/award amounts. Is there any information on either of these?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. \$400 million of the available funding is capital. \$250 million of the available funding is non-capital.
179	RFA page 3 of 36 states "The New York State Department of Health (NYSDOH) and the Dormitory Authority of the State of New York (DASNY) announce the availability of funds to support technological and telehealth projects that facilitate health care transformation activities". What is the total funding available for RFA #20258?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
180	RFA page 3 of 36 states "Funding will be made available in the form of grants and can include capital, non-capital, and working capital expenses". What is the minimum and maximum award amount allowed per grant for RFA #20258?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
181	The Statewide Health Care Facility Transformation Program has historically been geared towards applicants in financial distress or that demonstrates how the proposed use of the grant will strengthen their financial sustainability. This RFA #20258 page 4 of 36 states "The extent to which the Eligible Project will maintain or improve the long-term financial sustainability of the Eligible Applicant" will be considered. If an applicant is not in financial distress, as evidenced by Application Section 8 [Eligible Project Impact on Eligible Applicant Long-Term Financial Sustainability] and Attachment 2 [Projected Financial Information], is the applicant still eligible to apply?	If the Applicant meets the requirements of RFA Section II it is eligible to apply.
182	RFA page 6 of 36 lists eligible applicant types including: diagnostic and treatment centers, clinics, primary care providers, and community-based programs among many others. Federally qualified health centers are not listed. Are federally qualified health centers eligible to apply?	FQHCs are eligible to apply as Diagnostic and Treatment Centers if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements.
183	How much money is available under RFA # 20258?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
184	Is there a cap on how much one applicant can request? Or a minimum request?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
185	How many awards are expected?	There is no minimum or maximum number of successful applicants that are anticipated to receive awards.
186	Re: Section III, B. Eligible and Excluded Expenses and Disallowed Costs – how do you define capital funding?	Eligible Expenditures for capital funds and non-capital funds are both outlined in Section III. B.
187	Are expenses for an anti-elopement system (with integration to the nursing call system) eligible under this RFA?	Yes, contingent on the requested expenses meeting all other RFA requirements.
188	If yes to above, which category is it best suited for?	The Applicant should use its discretion to select the single most appropriate of the four categories.
189	Are projects required to advance health information exchange or health records safety?	Both are priorities of the Department. These funds are intended to support technological and telehealth projects that facilitate health care transformation activities.
190	Are MWBE and SDVOB forms, such as the M/WBE Utilization Plan, required at application?	Yes
191	If yes to above, and we plan to subcontract some work, how should we complete the MWBE/SDVOB forms? We cannot begin the procurement process in our organization until a grant has been awarded.	Please complete the required MWBE/SDVOB forms to the best of your ability. The identified vendors and amounts will be reviewed and confirmed by the DOH MWBE unit.
192	Re: Workplan, Section 11 – are you able to provide a draft/template workplan as a guide?	For the materials with specific formatting requirements, templates/forms have been provided. For the other attached documents, Applicants should use their discretion to determine the format that most clearly demonstrates their plan/proposal.
193	What is the total amount of available funding for this grant?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.

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Q#	Question	Answer
194	How much is the grant worth?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
195	For Cybersecurity, is it a requirement our organization become HITRUST certified, or do we just need to ensure our cybersecurity practices meet the HITRUST certification requirements?	HITRUST Certification is not a requirement. Applicant's cyber security practices must be comparable to national standards such as NIST/HITRUST.
196	Question regarding Section I. Introduction: How much total funding is allocated to funding RFA# 20258?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
197	Question regarding Section II. Who May Apply, item (b): are Article 16 clinics eligible to apply?	Article 16 clinics are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
198	Is there a limit on how much funding or the percentage of funding that may be contracted for services by the grantee? For example, as an Article 28 applicant, we would be supported by another nonprofit for cybersecurity, which would in turn be working with various vendors to support our cybersecurity needs.	No
199	Is there a time limit on projects? Minimum or maximum number of months or end date for spend down of funds?	There is no minimum period. Contracts will end on or before September 30, 2029.
200	In section III. Project Narrative/Workplan Outcomes, Part B. Eligible and Excluded Expenses and Disallowed Costs, one of the allowed costs is "construction costs necessary for the implementation of Health Information Technology and/or Telehealth activities." Can it please be clarified whether construction expenses are permitted under all four project categories (medical records, cybersecurity, health management tools, and telehealth)? If not, could the specification be made under which categories they are allowed?	Construction costs are allowed under all four categories.
201	In Section III. Project Narrative/Workplan Outcomes, Part B. Eligible and Excluded Expenses and Disallowed Costs, one of the excluded expenditures outlined is "items with a per unit cost less than \$250 and consumables." Given this criterion, if an applicant assembles a bundle of hardware for a telehealth home kit, wherein individual components such as an iPad, glucose monitor, etc., may be priced below \$250 each, yet the combined kit exceeds \$250, would such a bundle qualify as eligible under this exclusion?	No.
202	In section III. Project Narrative/Workplan Outcomes, Part B. Eligible and Excluded Expenses and Disallowed Costs, one of the allowed costs is "construction costs necessary for the implementation of Health Information Technology and/or Telehealth activities." Would acquiring and developing a site primarily dedicated to telehealth services, intended to function as the originating or distant site for patients in regions facing provider scarcity and communities lacking home internet access, with potential utility for other purposes intermittently, be deemed an eligible capital project within the telehealth project category?	Acquiring and developing a site could potentially be considered an eligible expense.
203	Regarding Section V. Completing the Application, Part 7. Project Budget: How should an applicant approach budgeting and milestone setting for larger multi-year transformation projects, where detailed design, specifications, and implementation plans will be delineated during the earlier strategy and planning phases of the overall project? Considering that costs and timelines may vary significantly based on the outcomes of the planning phase, are there any recommendations for factoring in uncertainties? Additionally, are there provisions for modifying the project scope, cost, or timeline in either direction over the course of the project period based on learnings from earlier phases or milestones?	The Applicant should use its discretion to develop all the necessary plans and corresponding budgets for its proposal. Post contract execution, if there was a change to the project budget the applicant would work with the Grants Management Bureau (GMB) to document the proposed scope, use and/or budget changes to the awarded project and GMB with DOH would determine if the project change is acceptable.
204	Regarding Section V. Completing the Application, Part 7. Project Budget: What are the implications if a project ends up costing less than what was initially budgeted for in the application and subsequently awarded?	Contractor will be reimbursed for eligible, actual expenses incurred as allowed in the Contract Budget and Workplan. At the end of the contract period left over funds would be rebudgeted by the Department.
205	If this is a state wide application, I'm assuming you would need data storage off site as well to be included?	Yes.
206	Lastly, do you need medical billing/insurance billing to be included with the health records service?	The Applicant should use its discretion to select and include information relevant to the proposed project.
207	Should the bid include the computers/hardware equipment that is recommended?	Yes.
208	Can one hospital apply on behalf of a group of independent hospitals to secure funding to develop a strategy and network model to collectively implement an integrated computer system to better support the healthcare needs of our community? If so, for purposes of the application, what documentation needs to be uploaded to demonstrate the commitment of the entities.	Yes. Letters of support from each organization should be included as an accompanying attachment in Grants Gateway by uploading to the Grantee document folder. Please see Addendum#1.
209	If one hospital can apply on behalf of a group of independent hospitals to secure funding to develop a strategy and network model to collectively implement an integrated computer system to better support the healthcare needs of our community, does the lead agency answer all of the program specific questions for the lead agency only? Or do we include information from all of the independent hospitals participating in the project?	Yes, the lead agency would answer on their organization only. The Department reserves the right to require additional information from other organizations at a later time.
210	If we are looking to collaborate/partner with other organizations for an integrated EHR and cybersecurity solution (#1), should we submit one joint application or separate applications referencing the potential collaboration?	You may submit an application from one lead Applicant benefitting multiple other organizations. Please see Addendum #1.
211	Recognizing that the amount of project requests may exceed available funds, does the state plan on awarding partial funding for eligible projects?	The Department of Health reserves the right to make an award in whole or in part.

Questions and Answers
Statewide Health Care Facility Transformation Program IV and V-Health Information Technology, Cybersecurity, and Telehealth Transformation
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Q#	Question	Answer
212	A minimum of 10 Objectives, 20 Tasks, and 30 Performance Measures is required for each Eligible Project. Are there specific measures that the state is looking to achieve with the awards?	Applicants should use their discretion to determine the objectives, tasks, and performance measures most appropriate to their plan/proposal. DOH reserves the right to make adjustments to the objectives, tasks, and performance measures at a later date.
213	Excluded costs lists routine training and maintenance costs related to IT projects and training of end-users or any 'help-desk' services or associated costs; are any training costs related to the support of the build and implementation of the new EHR eligible?	Yes: training 'trainers' or admin certifications required by vendors is potentially bondable.
214	Excluded costs lists employee salaries and benefits – If we have to add temporary staff specifically in support of build and implementation, can those salaries and benefits be included?	Please see Section III. B. Eligible and Excluded Expenses and Disallowed Costs.
215	Please clarify the statement: "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 all project requests may 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." Is preference given to applications that can demonstrate access to alternative financing or those who don't have access?	Preference will not be given to applications solely based on their ability or inability to demonstrate access to alternate funding.
216	Referencing Attachment 6, does the specific system/software need to be determined in advance of the grant submission or can the selection of the system be part of the eligible project and therefore costs for those systems be estimates?	The selection of the system may be part of the eligible project and therefore costs for those systems may be estimates in the proposal. Post contract execution, if there was a change to the project budget the Applicant would work with the Grants Management Bureau (GMB) to document the proposed scope, use and/or budget changes to the awarded project and GMB with DOH would determine if the project change is acceptable.
217	On Attachment 6, under "Ongoing Costs," there is a reference to: "In-house personnel costs including salaries and benefits (unless approved by the State)." Would salaries and benefits of in-house personnel dedicated to the build and implementation be approved by the state to be covered by the grant.	Employee salaries and benefits are listed as excluded expenditures in Section III. B. of the RFA.
218	For financial projections on potential revenue enhancements due to revenue cycle improvement and better documentation; please describe the type of detail needed to support the assumptions.	Attachment 2 should be completely filled out. Applicants can provide additional detail and discussion in the "Use of Funds, Detail of Expenses" attachment described in the second tab of Attachment 2.
219	<p>Q) We are a large IPA seeking to apply for a grant to integrate an enterprise EMR system. This system will connect all our providers' medical practices into one who currently use 40 different EMRs. About 1/3 of our practices are currently using the EMR that we intend to adopt as our enterprise system. However, this enterprise version will be different and configured specifically to better support our work in value-based care. Our question involves the following:</p> <p>Q) Can the grant be used to cover the software costs associated with replacing the existing EMR for those practices already using it, this will be in-line with the transition to the enterprise version?</p> <p>Q) Alternatively, if replacing the EMR is not allowed, can the grant funds be allocated for the data architecture or work required to reconfigure the existing EMR into the enterprise version?</p>	Yes, EMR replacement costs would be eligible contingent on the requested expenses meeting all other RFA requirements. Reconfiguration expenses would be eligible contingent on the requested expenses meeting all other RFA requirements.
220	If we apply for this funding, will we be able to apply additional funding next year to support a new project?	Yes, assuming you meet current and future eligibility requirements.
221	Correlation Between Questions and Objectives: Are individual questions in the grant application evaluated against each of these eight objectives? Or, are specific questions intended to address particular objectives? For instance, if a question is more relevant to one objective, such as 'Advancement of Health Equity,' is it evaluated solely under this objective?	Each of the eight evaluation criteria are applied to the whole of the application.
222	Scoring Impact on Overall Evaluation: If a response, such as our detailed explanation in question 6diii about healthcare service integration, achieves a high rating (e.g., 'Good') under a specific objective (like 'Contribution to Essential Health Care Services'), how does this influence the evaluation under the other objectives? Does a strong response in one area lead to potentially lower ratings in other objectives if the response primarily addresses only one objective?	Each of the eight evaluation criteria are applied to the whole of the application. Additionally, Per RFA Section V.C Review and Award Process, "the overall rating will be determined by a simple majority count of the rating for each individual criterion".
223	The eligibility criteria in section II(b) include "community-based organizations funded by local government." In section V(a)(2)(b) of the RFP, proof of eligibility is not specified for community-based organizations, although it is specified for other providers. What is the appropriate way to demonstrate this eligibility?	Providing specifics on the funding arrangement between "the office of mental health, the office of addiction services and supports, the office for people with developmental disabilities, or through local governments" would suffice for this eligibility criteria.
224	Page 33 of the RFA states that the work plan must have a minimum of 10 Objectives, 20 Tasks, and 30 Performance Measures (and maximums of 30 Objectives, 60 Tasks, and 90 Performance Measures). However, the instructions on the Grants Gateway "Work Plan Properties" form do not list minimums. Do the minimums listed in the RFA still hold?	Yes
225	There are four funding categories listed on page 1. Are there total award amounts to allocate in each of the four categories?	No
226	Is there a cap on individual grant awards? If so, does this cap vary by type of provider organization?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
227	Is it possible that 100% of a project would be funded by the requested grant funds, if all costs were eligible under the guidelines? Or, does NYSDOH expect proposers to plan for alternative funding sources to fund a portion of the project?	It is possible that 100% of a project would be funded.

Questions and Answers
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Q#	Question	Answer
228	What is the total amount of grant funding available under this RFP?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
229	How much of the grant funding available under this RFP will be allocated to home and community-based programs?	There is no predetermined amount.
230	Can the budget include a line item for "contingency"?	No
231	Is there a range for the amount of funding that could be requested minimum or maximum?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
232	Can we apply only to this grant, if we are not otherwise applying to the Statewide Health Care Facility Transformation Program IV?	Eligible Applicants shall not receive awards for duplicative expenditures under both this RFA and any other state or federal opportunity. Eligible applicants can apply to this RFA exclusively.
233	What is the time frame for using these funds?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, not expected prior to October of 2024, may be vouchered for reimbursement. Contracts will end on or before September 30, 2029 and closed out upon final payment approximately 30-60 days later.
234	Are any of the following items eligible for reimbursement if the item is a necessary component of the project to go live: tablets/ipads; computers; printers?	Items eligible for reimbursement must meet the criteria outlined in Section III. B. of the RFA.
235	For the Health Management Tools category description on page 3 of the RFA, it says in the first sentence: "Examples of projects include implementing applications that aggregate clinical and administrative data...". Can you define what you mean by "applications"?	For the purpose of this RFA, application is defined as software that performs a specific task.
236	Can you explain the "Transformation IV" and "Transformation V" classifications pertaining to this RFA and the other "Transformation IV" RFA's that were recently posted?	Transformation IV and Transformation V refer to individual NYS capital funding appropriations. Each RFA should be referenced for the specifics.
237	Would a project based around the implementation of artificial intelligence technology potentially be eligible under one of the 4 categories?	Artificial intelligence is not prohibited.
238	Can we request a grant to fund Electronic Medical Records leases? (i.e. EHR/EMR equipment and web-based leases as an example). Otherwise, would this be considered recurring licensing costs, which would be excluded for funding purposes?	Yes, contingent on the requested expenses meeting all other RFA requirements.
239	If we have signed a contract for an EHR project, but will not begin project work nor fund disbursement until after 10/1/24, would the project be considered eligible for Transformation funds?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement.
240	Can you share the scoring rubric? Page 24 of the RFA indicates that values and weights are assigned to various sections of the proposal, but we don't see these values or weights listed anywhere.	This text has been removed from the RFA. The Evaluation Criteria is listed in RFA Section III. C.
241	Has an amount of funding been allocated to projects within each category? If so, how much for each?	No
242	Will projects be evaluated against other projects that fall within each category? Or against the entire pool available for all projects?	Please see Section III.C Evaluation Criteria and Section V.C. Review and Award Process.
243	Can projects that are focused in one area include some expenses associated with the other categories? (for example Category 3 may require optimization or integration of EHRs)	Yes
244	RFA Section III. Project Narrative/Work Plan Outcomes, C. Evaluation Criteria states that NYSDOH will consider "the extent to which the Eligible Applicant has limited access to alternative financing" when making awards. Given this criterion, would projects including matching funds be viewed favorably or unfavorably? Would projects that do not include matching funds due to a lack of access to these funds be prioritized for awards?	Projects including matching funds will not be viewed more or less favorably based only on that criterion. Projects not including matching funds will not be viewed more or less favorably based only on that criterion. Applicant funds will be required for all excluded and disallowed costs in RFA Section III. B.
245	RFA Section III. Project Narrative/Workplan Outcomes: Can you please confirm that organizations are only permitted to submit one application in response to this RFA?	DOH will only review one application, specific to one project, per Applicant.
246	RFA Section III. Project Narrative/Workplan Outcomes, A. Eligible Projects: Can a project address multiple categories (Electronic Health Records, Cybersecurity, Health Management Tools, Telehealth) if a single category is identified as the primary category for the project? If so, what proportion of the funding request can be allocated to the secondary categories?	Yes. In cases where a project aligns with more than one of the four categories described in Section I, the Applicant should use its discretion to select the single most appropriate of the four categories. There is no limit to the proportion of the funding request that can be allocated to secondary categories.
247	RFA Section V, Completing the Application, A. Application Format/Content: Is this application to be submitted through Grants Gateway or the SFS system?	Applications must be submitted using the Grants Gateway.
248	What is the total amount of funding to be awarded through this RFA?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
249	Would a SIEM (security information and event management) system be eligible as a project under this grant to further secure patient data and harden our security posture?	Yes, contingent on the requested expenses meeting all other RFA requirements.
250	One of the stipulations in the document states for the project to be eligible, must express how it would improve patient care, outcomes, experience and advance medical equity. Whilst a cybersecurity mechanism doesn't deliver a different patient experience per say, it goes a long way to hardening the availability and security of the health care systems and the IT infrastructure that runs it. How is this ratified?	The Applicant should use its discretion to explain the value and impact of the proposed project to patient care, outcomes, experience and equity.

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Q#	Question	Answer
251	Our Electronic Medical Records (EMRs) system facilitates the complex coordination of care across multidisciplinary providers, both within and outside the agency. We plan to submit an application for funding for our EMRs system. Per Section 1 of the RFP, which of these two categories would this application best align with: Electronic Health Records or Health Management Tools? Electronic Health Records would seem to be the best fit. However, in Section III (C)(8), the term Electronic Medical Records (EMRs) is referenced, which also seems to be a fit.	The Applicant should use its discretion to select the single most appropriate of the four categories.
252	We are satisfied with our current EMRs vendor and we are not looking to enhance the services it provides or expand its usage. We would be requesting to voucher for reimbursement for the existing services, based on expenses incurred on after October 1, 2024. Per Section III (C)(8), is this an eligible expense?	Per Section III. B. only expenses prior to go-live are eligible for reimbursement. Go-live is defined as the point in time where the system is operational and is being used to support healthcare operations.
253	What is the Total Funding Amount Available?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
254	Is there a limit to amount of funding that an individual provider and/or community can ask for and receive in awards?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
255	G. Term of Contract (Paragraph 4) - Can you please provide further detail on the length/course of payout. It states "continued funding throughout the five year period". Is my understanding correct that all upfront expenses will be required to be paid by the provider, but they can subsequently submit invoices for reimbursement to chip away at total award? Or will there be a lump sum payout of awarded total amount initially?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Contracts will end on or before September 30, 2029 and closed out upon final payment approximately 30-60 days later.
256	How much funding can we ask for, is there a cap?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
257	Will the grant cover the costs of iPads?	Items eligible for reimbursement must meet the criteria outlined in Section III. B. of the RFA.
258	Would a booth (for privacy) be fundable under this grant, if its sole purpose was for telehealth services? It would be outfitted with all the necessary technology (e.g. ZenBooth)?	Items eligible for reimbursement must meet the criteria outlined in Section III. B. of the RFA.
259	Can you confirm if we are allowed to attach additional attachments in the Grants Gateway Grantee Document Folder for review? Specifically, our organization has 29 health centers, so we may need an additional attachment to respond to the following application question that is limited to 1,000 characters: a. RFA Section V, A, 3k: "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)."	No
260	Attachment 2 indicates that the "previous year" and "current year" columns should reflect the most recent certified financial statements. Our most recent statements are for calendar years 2021 and 2022, and do not fully reflect our current financial position. May we present unaudited financials for our most recent fiscal year as well, to better reflect our organization's current need?	Yes. They may be included with the uploaded response to Section V.5.a.
261	Can you confirm if the following criteria (beginning with "Software licenses") is meant to be split into two bullets, i.e., if the criteria is supposed to be "and," or "or"? a. RFA Section III, B, paragraph 3: "o Software licenses only if a one-time expense incurred prior to "go-live" and if used to develop the capital asset (and license does not extend past "go-live") Software licenses only if a one-time expense with a term of at least three years"	Yes. The RFA text has been amended please see Addendum#1.
262	Can you confirm if the following application question is meant to be split into two text boxes, each with its own character count, or if we are supposed to respond to both questions in the 1000 character text box (as shown in Grants Gateway)? a. RFA Section V, A, 4a: "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 healthcare needs of the community or communities served. The assessment should discuss: i. 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. ii. 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."	1000 characters is given, in this particular example, to answer a. The answer should also respond to 4.a.i and 4.a.ii
263	I am emailing in relation to the application for the Grant with an opportunity ID DOH01-SHCFTT-2024. Can you please advise whether Assisted Living Residences (ALR) are able to apply for this grant?	Assisted Living Residences (ALR) are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.

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Q#	Question	Answer
264	We would love to have the opportunity to apply for the Telehealth Grant, to allow our residents to participate in telehealth in the area of mental health. We live in a rural community and do not have the best access to these services. They are in need and should have this access. Thank you so much for your time.	Funded organizations must meet the requirements of RFA Section II. Who May Apply.
265	I'm wondering if these grant funds can be used to switch to a new Electronic Health Records system (as opposed to updating our existing EHR)? We'd like to move to a new EHR that will allow us to further expand, enhance, and improve access to our reproductive and acute care services.	Yes, contingent on the requested expenses meeting all other RFA requirements.
266	Can physician practices who provide specialist care, not primary care, apply for this grant?	Physician practices are eligible to apply if the Applicant is a not-for-profit organization and both the Applicant and proposed project meet all other RFA requirements. Applicants should use their discretion to select the most applicable provider organization type.
267	What is the definition of "Clinic" found in Section II (b)?	For the purpose of this RFA, Clinic is defined as a health care facility legally providing health care services.
268	Can independent entities in the same community who are looking to purchase the same electronic health record at the same time to act as a community EHR combine to make one application?	You may submit an application from one lead Applicant benefitting multiple other organizations. Please see Addendum #1.
269	How should clinical revenues be quantified for non-revenue generating elements such as IT security infrastructure? How should the expenses be related to revenues generated from IT infrastructure upgrades in the provided projected financial information template?	Attachment 2 should be completely filled out. Applicants can provide additional detail and discussion in the "Use of Funds, Detail of Expenses" attachment described in the second tab of Attachment 2.
270	We understand that the submission for this application will still run through Grants Gateway. Will post-award reporting run through the new SFS?	Yes
271	What is the anticipated award range and number of awards for this funding opportunity?	The number of awards will depend on the quality of applications. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system. There is no minimum amount.
272	In reviewing the RFA, I understand the final amount of each Eligible Applicant's total award, will be determined by the Commissioner based on criteria listed on page 35. If an award range cannot be specified, how much funding has been allocated to this opportunity?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
273	We are interested in this RFA as well and are wondering if we may apply. The NICIP funds, if awarded, would be for an unrelated project, would not be comingled with any DOH grant funding, and would be for an unrelated purpose. Is that sufficient to allow us to apply for both grants?	Eligible Applicants shall not receive awards for duplicative expenditures under both this RFA and any other state or federal opportunity, including the Statewide Health Care Facility Transformation Program IV (RFA# 20244) and the Nonprofit Infrastructure Capital Investment Program (NICIP) to be administered by DASNY.
274	We cannot find this opportunity in SFS. Are we applying through SFS or Grants Gateway for this application?	As per Section IV. E. Applications must be submitted online via the Grants Gateway
275	What is the total amount of funding being made available through this RFA?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
276	Is there a maximum award amount per applicant that can be requested?	Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
277	In our application, can we include EHR expenses that were incurred prior to a "go-live," which meet the other RFA criteria, but were incurred within the past few months?	Only expenses determined allowable under the contract budget and workplan and incurred on or after the start date of the contract, may be vouchered for reimbursement. Any obligations assumed by the contractor prior to execution of the contract are assumed at risk.
278	In Section I, page 4 of the RFA, there is reference to RFA#20244 (please see below). Where can we find this RFA? "Eligible Applicants shall not receive awards for duplicative expenditures under both this RFA and any other state or federal opportunity, including the Statewide Health Care Facility Transformation Program IV (RFA# 20244) and the Nonprofit Infrastructure Capital Investment Program (NICIP) to be administered by DASNY. Eligible Applicants must apply separately to RFA# 20244 if the primary focus of the Eligible Project is not technological and telehealth advancement. Applications to RFA # 20244 can include expenditures in support of technological and telehealth advancement not to exceed 15 percent of the total funds requested for Health Care Facility Transformation Projects."	RFA #20244: Statewide Health Care Facility Transformation Program IV (ny.gov)
279	Eligible Projects/Expenditures: Our hospital system is in the process of implementing an already initiated multi-phase project within the scope of the Electronic Health Records category and for which they have entered into a contract for development and implementation with an acknowledged multi-year timeframe. Based on the project's developed timeline, the application will coincide with Phase II of the project and as such there are two questions. First, are we correct in our assumption that funding for a specific phase of this comprehensive project that coincides with the goals and priorities of the RFP, constitutes an eligible project? And second, would an otherwise eligible expenditure that is invoiced but not yet incurred be allowable?	Yes, contingent on the requested expenses meeting all other RFA requirements especially that they are incurred prior to go-live of the enhanced system.

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Q#	Question	Answer
280	Eligible Expenditure: Our facility is considering a significant upgrade to improve wireless coverage and performance. Would this be more appropriately submitted under the Cybersecurity category or Electronic Health Record, as it involves improvements to infrastructure?	The Applicant should use its discretion to select the single most appropriate of the four categories.
281	Eligible Funds: Can you provide the total funding available for this RFP, and as well if applicable, any guidance as to an anticipated cap on a grant funding request?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million. Applications are not capped to a maximum award amount but should be reflective of the project proposed. Through the Evaluation Criteria and the Reserved Rights in the RFA the Department will factor in the Applicant's need for funds, efficient and resourceful plan for funds, and the impact funds would have on the statewide health system.
282	Eligible Expenditures: Understanding that items with a per unit cost of less than \$250 are excluded expenditures, can you provide any additional detail or examples of tangible items or consumables with a unit cost of \$250 or greater that might be considered excluded expenditures?	Examples of excluded expenditures are found in Section III.B of the RFA.
283	Eligible Applicant: We are a campus of comprehensive services of eligible applicants (Nursing Facility, Supportive Housing (ALRs), CHHA) with a campus-wide need for improvements to our cybersecurity. Each of these services are licensed independently but are situated on one campus setting. Would it be permissible to request grant funding for a cybersecurity initiative in a single application that would impact the entire campus, but that encompasses multiple certified services as noted, or would this initiative require multiple applications for each eligible applicant?	A <u>single application</u> could be submitted for review in this example.
284	Eligible Expenditures: Are start-up costs associated with the training and support of staff up to the "go-live" phase eligible for reimbursement with this grant?	No: Training end users and other support staff costs - even if prior to 'go-live' is not bondable.
285	Eligibility: If the proposed IT project is completely separate from any other Health Care Facility Transformation grant application, will it have any effect on eligibility or scoring for the other Facility Transformation RFAs that are anticipated to be released?	Eligibility and scoring of applications to current and/or future RFAs is subject to the eligibility and evaluation criteria detailed within the specific RFA.
286	Regarding question 1b: If a similar project was proposed under another round but not funded, what should the response to 1b be?	Yes, those applications should be added to 1.b. Indicate the program, applicant name, project name, \$0 awarded, and current status of the project.
287	What is the total amount of funding available for this initiative?	The total amount of funding awarded will depend on a number of factors including but not limited to the quality of applications and their potential improvement to the health care system, not to exceed \$650 million.
288	Eligibility: Can an active parent organization of an Article 28 hospital apply for funding?	Per Section II. Who May Apply 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.
289	Regarding question 1b: If a totally different project was proposed under another round but not funded, what should the response to 1b be?	Yes, those applications should be added to 1.b. Indicate the program, applicant name, project name, \$0 awarded, and current status of the project.
290	Regarding Pre-Submission Uploads, the templates in PDF format are not fillable. Can these please be replaced with either fillable PDFs or Word documents?	No.
291	Are homeless shelters eligible applicants for Statewide Health Care Facility Transformation Round IV and V? Do they qualify as Residential Facilities or "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 governments" if they are operating under contracts with the City of New York to provide shelter services? Some health care is offered onsite at shelters currently, but much more care is needed by the population, and telehealth would be tremendously valuable. Of the existing onsite health care services available, some services are provided by shelter organization staff and some services are provided by partner agencies coming into the facility.	Homeless shelters may be eligible to apply as "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 governments" if they are a not-for-profit and both the Applicant and proposed project meet all other RFA requirements. If applicants do not meet the definition above, applicants should use their discretion to select the most applicable provider organization type.
292	I have seen 3 opportunities now labeled SHFT IV--a generic one that came out today, a HIT opportunity from a few days ago that also lists round V, and a residential opportunity today. Are all of these actually Round IV or have some been mislabeled?	They have not been mislabeled.
293	Is eligibility the same for all of them? Which if any can a homeless shelter and/or permanent supportive housing agency apply for?	Yes, the eligibility is the same for all four categories. If the Applicant is a not-for-profit and meets the requirements of RFA Section II it is eligible to apply. Applicants should use their discretion to select the most applicable provider organization type.
294	Which if any can a homeless shelter and/or permanent supportive housing agency apply for?	Homeless shelters may be eligible to apply as "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 governments" if they are a not-for-profit and both the Applicant and proposed project meet all other RFA requirements. If applicants do not meet the definition above, applicants should use their discretion to select the most applicable provider organization type.
295	Which if any can a substance use disorder treatment and recovery services provider apply for?	Substance use disorder treatment and recovery services providers may be eligible to apply "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 governments" if they are a not-for-profit and both the Applicant and proposed project meet all other RFA requirements. If applicants do not meet the definition above, applicants should use their discretion to select the most applicable provider organization type.

Questions and Answers
Statewide Health Care Facility Transformation Program IV and V-Health Information Technology, Cybersecurity, and Telehealth Transformation
RFA #20258 / Grants Gateway # DOH01-SHCFTT-2024

Q#	Question	Answer
296	Can a for-profit organization apply for the Health Care Facility Transformation Program IV and V for Health Information Technology, Cybersecurity, and Telehealth Transformation grant money? Our organization is looking to implement a new EMR that will interface with our procedure centers and office practice.	No, text has been added to the RFA to clarify this opportunity is limited to not-for-profit organizations. Please see Addendum #1.
297	For question V.A.3.D, should clinicians serving in non-clinical titles be reported?	Yes, all staff in non-clinical titles, regardless of their credentials, with salaries of \$250,000 or more should be reported.