



Texas State of Office of Rural Health

2022 Rural Health Facility Capital Improvement Program (CIP)

Application Guide

Grant Year: 8/31/2022 – 8/30/2023

Application Due May 16, 2022, 11:59pm

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INSTRUCTIONS FOR SUBMITTING THE APPLICATION

The application procedures and TDA GO! instructions for submission of the 2022 Rural Health Facility Capital Improvement Program (CIP) are included in this Information and Application Guide. The procedures in this application guide supersede those published in all previous CIP application guides.

The deadline for all 2022 CIP applications is **11:59 p.m. C.T. on May 16, 2022**. The online application form should be completed and submitted by the deadline date for an applicant to be considered for funding.

Ensure the information provided in the online application form is accurate and complete before submitting. Only one application per applicant/facility is allowed.

The 2022 CIP online application in TDA GO! can be accessed using the following links:

[TDA GO!](#) - if you are unable to get in using CHROME try pasting the URL into a different browser such as Microsoft Edge. See Important Information section on page 12.

Website link: [Rural Health Facility Capital Improvement Program \(texasagriculture.gov\)](https://texasagriculture.gov/ruralhealth)

Please read all materials before preparing and submitting the online application form. Failure to follow the instructions and requirements described in these guidelines may result in the disqualification of the application.

For questions regarding submission of the application and/or Texas Department of Agriculture (TDA) requirements, please contact your Texas State Office of Rural Health (SORH) Regional Coordinator:

South Region – Eva Cruz:	Eva.Cruz@TexasAgriculture.gov
West Region - Kathy Johnston:	Kathy.Johnston@TexasAgriculture.gov
East Region - Trish Rivera:	Trish.Rivera@TexasAgriculture.gov
North Region – Lyn Schermerhorn:	Lyn.Schermerhorn@TexasAgriculture.gov
Central Region - Shari Wyatt:	Shari.Wyatt@TexasAgriculture.gov
Panhandle Region – Ryan Horsak:	Ryan.Horsak@TexasAgriculture.gov

You may also call (512) 936-7875 or email RuralHealth@TexasAgriculture.gov if you need immediate assistance.

PROGRAM RULES AND GENERAL INFORMATION

This application guide contains the requirements that all applicants are required to meet to be eligible for funding. Failure to conform to these requirements may result in the disqualification of the application. Each applicant is solely responsible for the preparation and submission of an application in accordance with the instructions in this application guide.

Statement of Purpose

The Rural Health Facility Capital Improvement Program (CIP) provides funding for rural public and non-profit hospitals to make capital improvements to existing facilities, construct new health facilities, or to purchase capital equipment.

Eligible Applicants

Eligible applicants for CIP include public and non-profit hospitals located in rural counties. For purposes of this program, the following definitions shall apply:

- (1) "Public hospital" means:
 - (a) a general or special hospital licensed under Chapter 241 of the Texas Health and Safety Code;
 - (b) that is owned or operated by a municipality, county, municipality and county, hospital district, or hospital authority;
 - (c) that performs inpatient and outpatient services; and
 - (d) that operates off of government funding/public money (e.g., money collected from taxpayers and public contributions).

Note: A hospital or medical facility that is leased, licensed, managed and funded by an individual, a group of people or a for-profit entity, or operated with private profit, is not considered a public hospital.

- (2) "Rural County" means a county that has a population of 150,000 or less; or with respect to a county that has a population of more than 150,000 and contains a geographic area that is not delineated as urbanized by the federal census bureau, that part of the county that is not delineated as urbanized.

Link to check county census: census.gov/quickfacts/table/PSTO45216/48

Award Amount

Award amounts shall not exceed **\$75,000**.

Match

Applicants are required to commit a minimum of **25% match of CIP funds requested**. For example, if requesting \$75,000 in CIP funding, an applicant must commit to a match of \$18,750 for a total project cost of \$93,750. Matching funds must be reflected within the application and must be associated with the same proposed project activities as the requested CIP funding.

Calculating CIP Grant Amount & Matching Funds

For total project costs less than \$93,750:
<ul style="list-style-type: none">• Calculate by dividing the total project cost by 1.25. The resulting number will be the CIP grant amount. The difference between this number and the total project costs will be the amount of required funds to be matched.• <u>Example</u>: Total Project Cost = \$65,000• $\\$65,000 / 1.25 = \\$52,000$ (CIP Grant Amount)• $\\$65,000 - \\$52,000 = \\$13,000$ (Matching Funds) (Note: 25% of \$52,000 (CIP grant amount) = \$13,000 matching funds)
For total project costs more than \$93,750:
<ul style="list-style-type: none">• Calculate by subtracting \$75,000 (the maximum CIP grant amount) from the total project costs. The resulting number will be the amount of required funds to be matched.• <u>Example</u>: Total Project Cost = \$200,000• CIP Grant Amount = \$75,000• $\\$200,000 - \\$75,000 = \\$125,000$ (Matching Funds)

Certification of Project and Matching Funds

If awarded, CIP grantees receive funding on a cost-reimbursement basis for project costs incurred during the CIP grant period. The Certification of Project and Matching Funds ensures that the entire total project costs amount for the CIP project has been secured and is available if awarded. On the Certification Page in the TDA GO 2022 CIP application, the applicant will certify that the entire total project cost amount is secure and available by signing in the section provided.

Proportionate Grant Reduction

The CIP grant requires matching expenditures in an amount equal to or greater than 25% of the awarded grant amount. When awarded, grant recipients will be held accountable for maintaining the required minimum 25% match of the awarded grant amount. In the event the grant recipient's match is reduced below 25%, the Department may proportionally reduce the amount of the CIP grant funds.

Eligible Uses of Grant Funds

Allowable expenses include activities that further, or sustain, a hospital's ability to provide healthcare. To include:

- a. **Life Safety Code Violation -**
Violations may include: Unsafe flooring, food safety, new fire sprinkler system, upgrades to meet new code requirements. Please include documentation of the safety code violation.
- b. **Patient Care Project -**
Must be non-expendable personal property with a unit cost of more than \$5,000 and a useful life of more than one year. Ex. Mammography equipment, X-Ray machine, Lab equipment, ambulance

or community paramedicine van, etc.

c. **Construction (Repairs/Remodeling/Maintenance) Project -**

Includes, but is not limited to, contracts for any construction on the hospital or outbuildings, remodel projects, additions, etc. Ex: New roof, HVAC, clinic remodeling, window replacement, etc.

d. **Other (contract for non-medical services) -**

Designing, engineering, supervising, surveying, and other expenses incidental to the acquisition, construction, or improvements of new hospitals.

NOTE: Each application **must include** documentation supporting the costs associated with project activities. CIP funds are to be utilized specifically as proposed by an applicant within their application, if awarded. CIP funds **shall not** be utilized to reimburse an applicant for operating expenses, debt retirement, or recruitment/retention of providers.

Commitment of Key Personnel

To ensure the success of the project, key personnel directly impacted by the project should be included and involved with the planning and development of the project. Their involvement is a must to ensure the project is effectively implemented, that it will meet the identified needs, and guarantee its sustainability. For example, if an applicant has applied for funding to purchase infant warmers, the head of the nursery department would be consulted to certify the need of the equipment and its prolonged use. *If a change in scope of work occurs, please contact your regional coordinator immediately to discuss the change.*

As directed in the application, please provide a brief summary of hospital personnel who will be directly involved in the implementation the project and their roles. If applicable, support from other organizations may also be discussed.

Responsibilities and Accountability of a Grantee

Grantees must comply with all guidelines and requirements of the CIP program, including compliance with all reporting requirements. Grantees are responsible for the administrative/financial control and management of the grant award. Grantees must ensure they have an adequate accounting system in place and acceptable internal controls to ensure expenditures and reimbursements are reported and maintained for a minimum of four (4) years after the conclusion of the project.

Grantees have full responsibility for the conduct of the project and for the results achieved. Each grantee shall monitor the day-to-day performance of the grant project to assure adherence to statutes, regulations, and grant terms and conditions. Grantees shall carry out the activities described in their scope of work to achieve project goals, objectives, and desired outcomes. Grantees will be accountable for all grant funds and must ensure all funds are used solely for authorized and eligible purposes. Each grantee must ensure:

- Funds are used only for activities covered by the approved project.
- Funds are not used in violation of the restrictions and prohibitions of applicable statutes.
- If applicable, budget and performance reports are completed in a timely manner.

Reporting Requirement

Project Completion Report (PCR)

Grantees are required to submit a project completion report at the end of the project reflecting the status of the project. Copies of invoices and proof of payment documentation related to the project must be submitted along with the completion report before grant funds will be released.

SORH staff reserves the right to request any and all documentation necessary to ensure compliance with program rules and regulations.

Reimbursement Procedures

Grantees shall receive funding on a cost-reimbursement basis for project costs incurred during the CIP grant period of August 31, 2022, through August 30, 2023. Invoices for purchases outside the project period will not be reimbursed unless prior approval is issued by the State Office of Rural Health. Once submitted, the PCR shall be reviewed and grant funds will be disbursed.

Annual Inventory of Property Report

Grantees that utilize funds to purchase equipment (non-expendable property with a unit cost of more than \$5,000 and a useful life of more than one year) shall be required to maintain an inventory list of items purchased with grant funds detailing the item's location and condition and shall be made available to TDA upon request.

Costs Incurred Prior to Grant Award

Pre-award costs are those incurred prior to the effective date of the award. If a situation occurs between the grant submission date (May 16, 2022) and the contract start date (August 31, 2022) whereby the applicant is forced to incur project costs such as the purchase of equipment, the applicant **MUST** contact the State Office of Rural Health and receive written approval prior to the purchase. Approval is on a case-by-case basis and issued based on the necessity of the purchase. Approval of pre-award costs does not guarantee an award will be made.

Prior to the contract start date of August 31, 2022, if costs are incurred without prior approval, TDA is not liable for any costs incurred by the applicant.

APPLICATION REVIEW & SELECTION

Application Review

Applications may only be submitted in TDA GO! and once received will be reviewed by SORH for completeness. The TDA GO! System will not allow an application to be submitted after 11:59pm, May 16th, 2022. An application may be disqualified for the following reasons which include, but are not limited to:

- Late or Incomplete Application
- Mailed, Emailed, or Faxed Application
- Applicant is Ineligible
- No documentation supporting the cost associated with the project activities (quotes, estimates, etc.)

Complete applications will be reviewed by SORH pursuant to the factors outlined in Texas Administrative Code, Title 4, Part 1, ch. 30, Section 30.202(a). (a) Each application will be reviewed by the department for completeness, relevance to the published request for applications, adherence to department policies, general quality, technical merit, and budget appropriateness. Applications will also be scored and ranked utilizing the scoring criteria listed below.

Application Selection and Execution of Contract

TDA shall determine the final funding amount and terms of a CIP award. TDA reserves the right to fund projects fully or partially and to negotiate individual elements included within an application. Contingent upon available funds, the selected applicant may be requested to submit a revised project budget and project narrative. Selected applicants will receive an official Grant Agreement from TDA. The Grant Agreement is not legally binding until a grant agreement is fully executed.

False Information on Applications

If the applicant provides false information in an application that has the effect of increasing the applicant's competitive advantage, staff shall make a recommendation for action to the Director of the SORH.

Actions that the Director may make include, but are not limited to:

1. Disqualification of the application.
2. Even if an award has been made, the applicant may be liable for funds expended if adjustment to the scores would have resulted in a change in rankings for the purposes of funding.
3. Holding the applicant ineligible to apply for CIP funding for a period of (2) program years.

An applicant may request reconsideration of a decision of the SORH Director by filing a written request for reconsideration with the Administrator of the Division of Trade and Business Development. The written request should include the factual and legal basis supporting the request for reconsideration, along with supporting documentation. The Administrator shall make a written determination on applicant's request for reconsideration within sixty (60) days of TDA's receipt of the request for reconsideration.

Scoring Criteria

All eligible applications received by the published deadline will be scored and ranked utilizing the following scoring criteria.

2. The majority of CIP funding will be used for which type of project:
 - a. Life Safety Code Violation¹ - 4 pts.
Violations may include: Unsafe flooring, food safety, new fire sprinkler system, upgrades to meet new code requirements. Please include documentation of the safety code violation.
 - b. Patient Care Project - 3 pts.
Must be non-expendable personal property with a unit cost of more than \$5,000 and a useful life of more than one year. Ex. Mammography equipment, X-Ray machine, Lab equipment, ambulance or community paramedicine van, etc.
 - c. Construction (Repairs/Remodeling/Maintenance) Project - 2 pts.
Includes, but is not limited to, contracts for any construction on the hospital or outbuildings, remodel projects, additions, etc. Ex: New roof, HVAC, clinic remodeling, window replacement, etc.
 - d. Other (contract for non-medical services) - 1 pt.
Designing, engineering, supervising, surveying, and other expenses incidental to the acquisition, construction, or improvements of new hospitals.
2. Net revenue as a percent of gross revenue²:
 - a. Less than 3% 5 pts.
 - b. Greater than or equal to 3% 2 pts.
3. Current days in net account receivables²:
 - a. Greater than 53 days 5 pts.
 - b. Between 15-53 days 2 pts.
 - c. Less than 15 days 0 pts.
4. The hospital's current ratio of assets to liabilities²:
 - a. Less than 1.25 5 pts.
 - b. Between 1.25 to 1.75 2 pts.
 - c. Greater than 1.75 0 pts.
5. Current days cash on hand for hospital²:
 - a. Less than 15 days 5 pts.
 - b. Between 15-60 days 2 pts.
 - c. Greater than 60 days 0 pt.
6. Hospital's Operating Margin (operating income/total revenue)²:
 - a. Less than 2% 5 pts.
 - b. Greater than or equal to 2% 2 pts.
7. Previous CIP funding:
 - a. Facility not awarded in 3 previous cycles -2020, 2019, 2018 25 pts.
 - b. Facility awarded in 2018, completed project 10 pts.
 - c. Facility awarded in 2019, completed project 1 pt.
 - d. Facility awarded in 2020 0 pts.

Footnotes:

1. **Life Safety Code Violation** - To receive funding points in the "Life Safety Code Violation" category, the applicant must cite the code violation, provide actual violation documentation from the agency issuing the violation, must currently be in a code violation or evidence that the facility will be placed in violation during the grant award period. If supporting documentation for the code violation is not provided, no points will be given for this category.
2. **Financial Data Certification** - In Section I: Certifications and Authorizing Official Signature of the CIP

application, the applicant will certify that the financial data (Net Revenue as a Percent of Gross Revenue %, Current Days in Net Account Receivables, Current Ratio of Assets to Liabilities %, Current Days Cash on Hand, Operating Margin) provided in the application is correct and accurate by signing in the section provided.

NOTE: If a tie-breaker is required when awarding funds, SORH will use the county poverty rate of the county where the facility is located to determine the ranking order for these applications, with a higher poverty rate taking priority.

ADMINISTRATIVE INFORMATION

Right to Amend or Terminate Program

TDA reserves the right to alter, amend, or clarify any provisions, terms, or conditions of this program or any grant awarded as a result thereof, or to terminate this program at any time prior to the execution of an agreement, if TDA deems any such action to be in the best interest of TDA and of the State of Texas. The decision of TDA will be administratively final in this regard.

Proprietary Information/Public Information

The applicant is responsible for clearly designating any portion of the application that contains proprietary or trade secret information and must state the reason(s) the information is designated as such. Merely making a blanket claim the entire application is protected from disclosure because it contains proprietary or trade secret information is not acceptable, and shall make the entire application subject to release under the Texas Public Information Act. In the event that a public information request for the application is received, TDA shall process such request in accordance with Section 552.305 of the Texas Government Code. Applicants are advised to consult with their legal counsel regarding disclosure issues and to take appropriate precautions to safeguard trade secrets or any other proprietary information.

All applications submitted under this program are subject to release as public information, unless the application or specific parts of any such application can be shown to be exempt from disclosure under the Texas Public Information Act, Chapter 552 of the Government Code.

Conflict of Interest

The applicant is required to disclose any existing or potential conflicts of interest relative to this grant program. Failure to disclose any such relationship may result in the applicant's disqualification or termination of agreement.

General Compliance Information

1. Grantees must comply with TDA's reporting requirements and financial procedures outlined in the grant agreement. Any delegation by the Grantee to a subcontractor regarding any duties and responsibilities imposed by the grant award must be approved in advance by TDA and shall not relieve the Grantee of its responsibilities to TDA for their performance.
2. All grant awards are subject to the availability of funds appropriated and authorized by the Texas Legislature.

3. Grantees must remain in full compliance with applicable state and federal laws and regulations. Non-compliance may result in termination of the grant or ineligibility for reimbursement of expenses.
4. Grantees must keep separate records and a bookkeeping account (with a complete record of all expenditures) for a project. Records shall be maintained for a minimum of four (4) years after the completion of the project, or as otherwise agreed upon with TDA. If any litigation, claim, negotiation, audit or other action is initiated prior to the expiration of the three-year retention period, then all records and accounts must be retained until their destruction is authorized by TDA. TDA and the Texas State Auditor's Office (SAO), or any successor agency, reserve the right to examine all books, documents, records, and accounts relating to the project, including all electronic records, at any time throughout the duration of the agreement until all litigation, claims, negotiations, audits or other action pertaining to a grant is resolved, or until the expiration of the three-year retention period, whichever is longer. TDA and the SAO, or any successor agency, shall have access to: all electronic data or records pertaining to the grant project; the physical location where records are stored; and all locations related to project activities.
5. If the Grantee has a financial audit performed during the time the Grantee is receiving funds from TDA, upon request, TDA shall have access to information about the audit, including the audit transmittal letter, management letter, any schedules, and the final report or result of such audit.
6. Grantees must comply with Texas Government Code, Chapter 783, Uniform Grant and Contract Management, and the Uniform Grant Management Standards (UGMS).

CIP 2022-2023 APPLICATION COMPLETION INSTRUCTIONS IN TDA GO!

Welcome to TDA's new grant management system, TDA GO!! This guide describes how to complete your 2022 CIP application. For more detailed technical assistance information on navigating through the TDA GO! system, please view the [TDA Go! Grant Recipient Training Manual](#). This manual provides information on changing passwords or users, sending and accessing messages, document searches, etc. The link for the manual is located on the page icon in the upper righthand corner of the screen (Figure 1). You may also contact your Rural Health Coordinator (RC) with any questions on completing the Application. See the page 3 of the Application Information for your RC's contact information

Figure 1. TDA GO! Grant Recipient Training



PLEASE READ: IMPORTANT INFORMATION FOR COMPLETING THE APPLICATION

The deadline for the 2022-23 CIP grant submission is Monday, May 16th, 2022 at 11:59pm. Applications **MUST** be submitted by this due date. Submissions are time and date stamped. The online application will no longer be available for changes or submission after the 11:59pm time stamp. Times identified are based on TDA headquarters (Central Time Zone) and are displayed on your TDA-GO! home screen.

1. Technical assistance in completing the application
 - a. You may schedule time with your RC to have them assist you in completing the application. Please try to do this as early as possible within the month allowed for submission time.
 - b. Technical assistance for submitting the application is available from your RC until 5:00pm on May 16, 2022. Please see page 2 of this guide for your RC's name and contact information.
 - c. RC's are available to answer questions regarding the program and to provide clarifying information concerning this application guide. TDA staff will not review any grant proposals prior to the application deadline.
2. Applicants may apply for a maximum grant of \$75,000.00, plus required matching funds.
3. Please make sure your EIN/TIN and DUNS numbers are correct in the Organization profile. The EIN/TIN number indicates the account to which you would like your payment deposited. It may be a foundation. If any of these numbers are incorrect, please inform your rural health coordinator.
4. An application can be saved at any point by clicking the Save button at the top right side of the application. See Figure 6 on page 14.
5. While in the Application section you will be able to toggle back and forth between the application pages. Be sure to save your information before leaving in each page.
6. TDA GO! cannot digest certain symbols. Please refrain from using symbols in the text fields. If a text field has a **red asterisk *** it will require data. If you have none, please put N/A in the field.
7. Do not open multiple windows or browser tabs while filling out the document, as this can cause issues with browser cookies resulting in either being kicked out of the system or work being lost.
NOTE: If the user needs to have multiple windows open, please ensure that the user is using a separate browser session instead.
8. Please type in your password and do not cut and paste. This could result in a space being added in at the end and affect your ability to login.

LOGGING INTO THE SYSTEM

Website Link: <https://tda-go.intelligrants.com/> Enter your username and password on the TDA-GO! login page (Figure 2). If you cannot get in using Chrome, try pasting the URL in another browser such as Microsoft Edge.

Figure 2.
TDA GO! Home page

When you get to your Dashboard please **do not** initiate a new application. Use the application that is already started for you and loaded into the My Tasks section of the Dashboard.

DASHBOARD

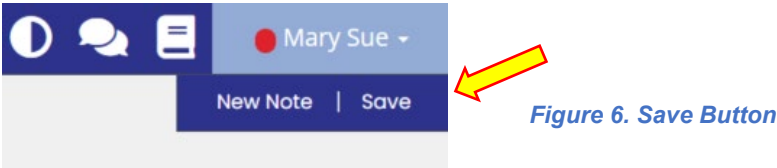
After logging in, your organization's Dashboard will appear (Figure 3). In the My Tasks section you will find your 2022 CIP application. You can also view your profile and check for accuracy. **Much of the profile for both the hospital organization and each individual system user has been prefilled for you.** Please click on each Profile tab and the Organization tab and double check **ALL FIELDS** for accuracy of information (Figures 4 & 5). The *Profile* tab is located under your name in the upper righthand corner. You may find a link to your *Organization Information* on the Dashboard My Tasks section in the grant application, or under the Organizations in the Profile/Person Information page.

Figure 3. Dashboard Page

Figure 5. Dashboard Page

Figure 4. Profile Page

In the My Tasks section of the Dashboard, as shown above in Figure 3, click on the application ID (name) RCP2022### and this will take you to the Document Landing Page where your application is housed. Again, please note that while completing the application you may save it by clicking the Save button at the top right side of the application (Figure 6). It will appear on in the My Tasks section of your Dashboard and you may reopen it at any time in the process.



DOCUMENT LANDING PAGE

Note: When in any stage of the application you may click on the application ID and view the Document Landing Page (Figure 7) for your hospital’s application. The application ID is also your grant number and will appear on the app, contracts, reports, etc. The Application page is where you are taken once you select an application to view. The navigation bar on the left side of the page includes sections for:

- Application ID/Name – contains grant, organization, due date, status, role being performed, etc.
- Forms – contains the Application Contact Information, Application, and Certification forms.
- Status Options – contains the submission and cancel applications buttons
- Tools – contains add/edit people, status history, attachment repository, etc.
- Related Documents

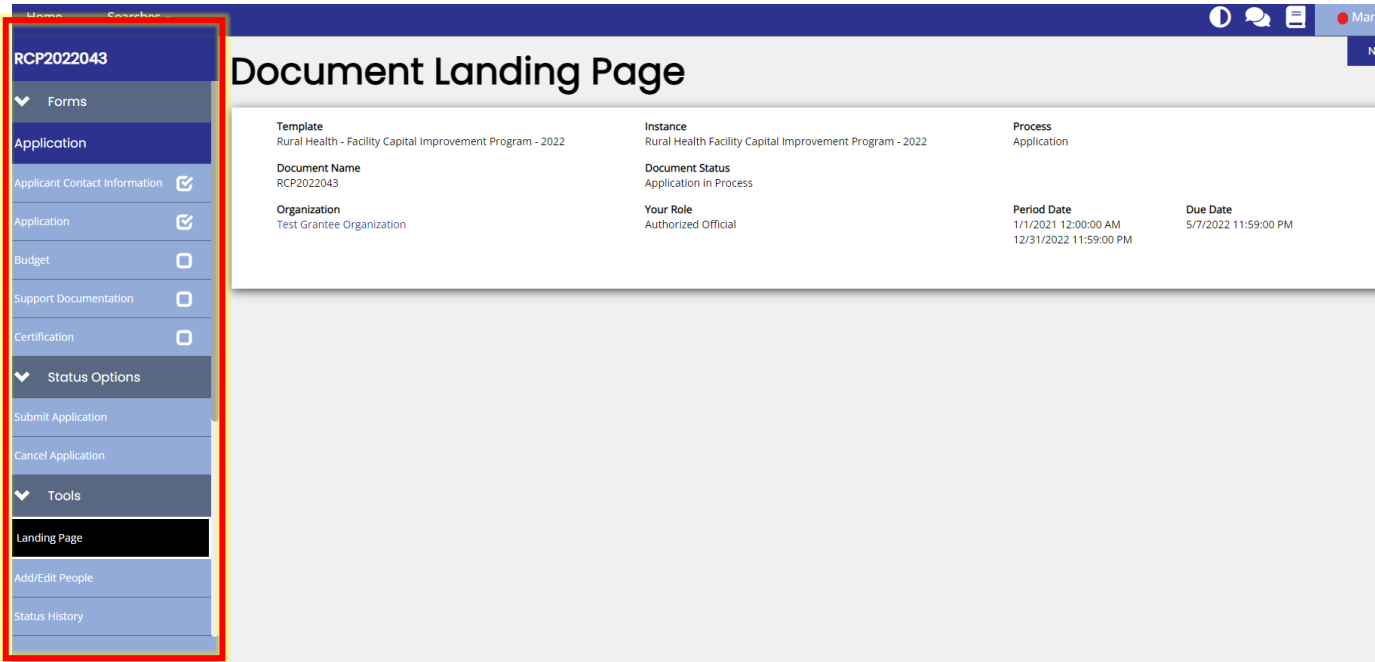
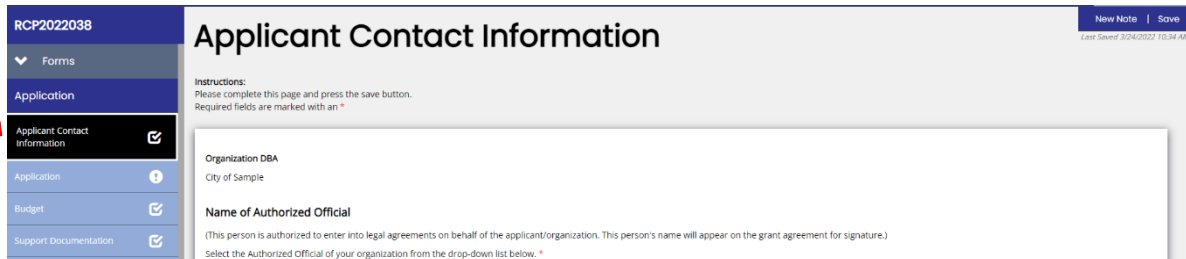


Figure 7. Document Landing Page

APPLICANT CONTACT INFORMATION

Much of the Applicant Contact Information has been prefilled for you. Please click on this tab and double check **ALL FIELDS** for accuracy of information. There are additional blank fields where you may add other staff contacts. See Appendix for definitions of roles. Note: When you are completing this section, some fields may autofill. This is connected to information in your own computer's autofill function, so please check any fields that auto populate to make sure the correct information is entered. If any corrections are needed, please notify your RC immediately.



After completing the review of the Applicant Contact Information page, click Save and then the Next Form button at the bottom of the page to take you to the main Application page (Figure 8).

Next Form >

Figure 8. Next Form Button

Note: As you complete each section a check mark will show up next to it on the navigation tab on the left side (Figure 9).

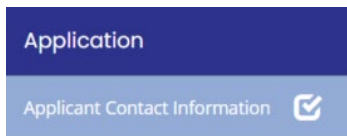


Figure 9. Completion Check

APPLICATION

Click on the Application navigation tab and it will bring you to the main body of the application (Figure 10). Some of this information is preloaded for you. Please verify it for correctness. If there are errors, notify your RC immediately so it can be fixed. **Remember, if there is a field that requires text and you have none to enter please put N/A.**

Please complete all sections of the application. If you do not and you try to certify and submit the application the system will not allow you to do so. An error window will pop up that tells you what remains to be completed (Figure 11).

Figure 10. Application

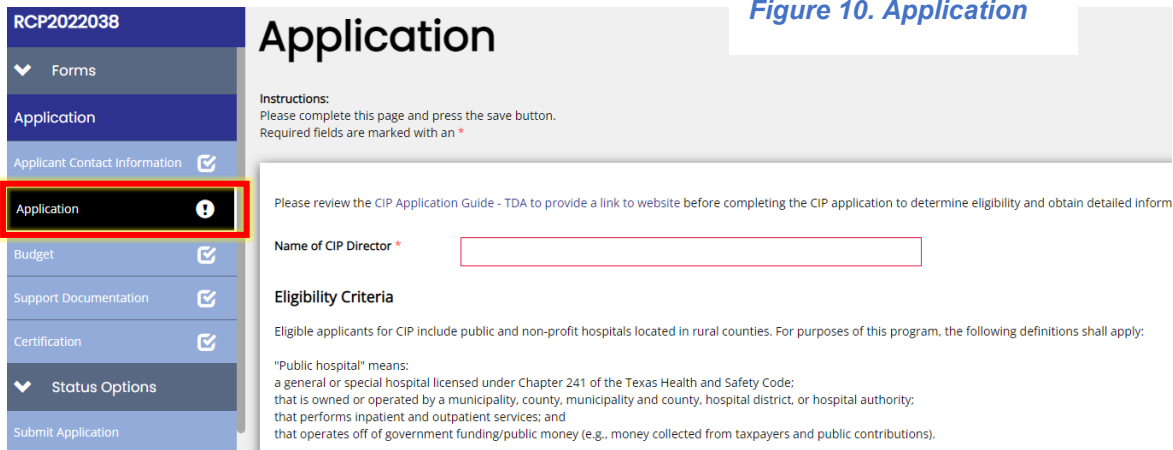


Figure 11. Example: Error Pop-Up Window

Attention

- Name of CIP Director is required.
- Application Question 1 is required.
- Application Question 2 is required.
- Application Question 3 is required.
- Application Question 6 is required.
- Application Question 7 is required.
- Application Question 8 is required.
- Project Description is required.
- Project Personnel is required.

Remember: You can toggle back and forth between pages with the Previous and Next Form buttons at the bottom of the page. When you toggle either way the system will automatically save any entries you have made.

< Previous Form

Next Form >

IMPORTANT - Eligibility Criteria – Please review the criteria below completely and answer the questions in this section. If you have any questions about your eligibility please contact your rural health coordinator, see page 3.

Eligible applicants for CIP include public and non-profit hospitals located in rural counties. For purposes of this program, the following definitions shall apply:

- (1) "Public hospital" means:
 - (e) a general or special hospital licensed under Chapter 241 of the Texas Health and Safety Code;
 - (f) that is owned or operated by a municipality, county, municipality and county, hospital district, or hospital authority;
 - (g) that performs inpatient and outpatient services; and
 - (h) that operates off of government funding/public money (e.g., money collected from taxpayers and public contributions).

Note: A hospital or medical facility that is leased, licensed, managed and funded by an individual, a group of people or a for-profit entity, or operated with private profit, is not considered a public hospital.

- (2) "Rural County" means a county that has a population of 150,000 or less; or with respect to a county that has a population of more than 150,000 and contains a geographic area that is not delineated as urbanized by the federal census bureau, that part of the county that is not delineated as urbanized.

Application Questions: Please review these questions carefully and answer accurately. See Page 9 of the Grant Information section for more detail on these questions.

Question 1. Select the type of project for which you are requesting funding. Select only one type. If your project is composed of two types, select the type in which most of the funds are being requested. (Example: Patient Care Project Including Equipment or Patient Transportation = \$27,000, Construction = \$45,000: select Construction.) See page 5-6 for Eligible Use of Grant Funds for additional clarification. If you have questions as to whether a project is eligible, please contact your rural health coordinator, page 3.

- Life Safety Code Violation - Violations may include: Unsafe flooring, food safety, new fire sprinkler system, upgrades to meet new code requirements. Please include documentation of the safety code violation.
- Patient Care Projects – Must be non-expendable personal property with a unit cost of more than \$5,000 and a useful life of more than one year. Ex. Mammography equipment, X-Ray machine, Lab equipment, ambulance or community paramedicine van.
- Construction/Building Repairs/Remodeling - includes, but is not limited to, contracts for any construction

on the hospital or outbuildings, remodel projects, additions, etc. Ex: New roof, HVAC, clinic remodeling, window replacement, etc.

- Other (Contracts for non-medical services) - Designing, engineering, supervising, surveying, and other expenses incidental to the acquisition, construction, or improvements of new hospitals.

Questions 2, 3, 4, 5, 6 - Provide the applicant's financial information based on the most recent audit/financial report. If negative number, be sure to enter negative sign. See Page 9 for expanded questions.

- 2. Net Revenue As Percent of Gross Revenue
 - Net review is the combined actual revenue (patient services and non-patient care revenue such as supplemental funds and tax subsidies, grants, etc.) Net revenue as a percent of gross is calculated by taking net revenue (numerator), divided by gross revenue (denominator), and multiplying by 100.
 - Gross revenue is all income accounted for on the income statement without consideration for any expenditures from any source.
- 3. Current Days in Net Account Receivables
- 4. Current Ratio of Assets to Liabilities: current assets/current liabilities
- 5. Current Days Cash on Hand
- 6. Operating Margin: Operating Income/Total Revenue

Question 7 - Select the answer that describes previous CIP funding for the applicant facility.

- Facility was not awarded in 2020, 2019, 2018
- Facility was awarded in 2018, completed project
- Facility was awarded in 2019, completed project
- Facility was awarded in 2020

BUDGET

Match - Applicants are required to commit a minimum of **25% match of CIP funds requested**. For example, if requesting \$75,000 in CIP funding, an applicant must commit to a match of \$18,750 for a total project cost of \$93,750. Matching funds must be reflected within the application and must be associated with the same proposed project activities as the requested CIP funding.

Calculating CIP Grant Amount & Matching Funds

For total project costs less than \$93,750:

- Calculate by dividing the total project cost by 1.25. The resulting number will be the CIP grant amount. The difference between this number and the total project costs will be the amount of required funds to be matched.
- Example: Total Project Cost = \$65,000
- $\$65,000 / 1.25 = \$52,000$ (CIP Grant Amount)
- $\$65,000 - \$52,000 = \$13,000$ (Matching Funds)
- (Note: 25% of \$52,000 (CIP grant amount) = \$13,000 matching funds)

For total project costs more than \$93,750:

- Calculate by subtracting \$75,000 (the maximum CIP grant amount) from the total project costs. The resulting number will be the amount of required funds to be matched.
- Example: Total Project Cost = \$200,000
- CIP Grant Amount = \$75,000
- $\$200,000 - \$75,000 = \$125,000$ (Matching Funds)

Budget Table – In the first field, please enter the total project cost, hit Save and it will calculate your match amount. In the budget table below enter the appropriate figures and place a Ø (zero) in each field you do not use. There must be a digit in each field, or the application will show an error and you will not be able to submit. (Figure 12)

Enter the Total Project Costs – the page will calculate for you the grant and match amounts.

Total Project Cost	\$ 96,410.27
CIP Maximum Grant Amount	\$75,000.00
Match Amount	\$21,410.27

Figure 12. Example CIP Budget Table

Based on the CIP Grant Amount and Match Amount calculated above, assign costs to the requested category(ies).

Project Type	CIP Funds Requested	Match Amount	Total
Equipment	\$ 65,000.00	\$ 18,910.27	\$83,910.27
Contract for Non-medical Services	\$ 10,000.00	\$ 2,500.00	\$12,500.00
Patient Transportation	\$	\$	\$0.00
Construction	\$	\$	\$0.00
Total Direct Costs:	\$75,000.00	\$21,410.27	\$96,410.27

Click **Save** and the **Next Form** button to be taken to the Certification page, or click the Certification navigation tab on the left side of the screen.

SUPPORT DOCUMENTATION

For the proposed capital improvement project it is required that an applicant provides supporting documentation of project costs, i.e. equipment/construction quotes, estimates, and other relevant supporting documentation. To add these documents, click on Support Documents tab, click Select (Figure 13), search for the document you want and upload it to this section.

Budget	✓
Support Documentation	□

Figure 13. Select Button for uploading support documents

Supporting Documentation

Instructions:
Please upload the following documents and click save.
If there is more than one upload, use the plus button to add additional upload fields.
Required fields are marked with an *.

Required Uploads

Vendor and/or Contractor Quotes/Estimates *

Select Drag Files Here +

Other Relevant Project Documents, if any

Select Drag Files Here +

CERTIFICATION

This page is where the Authorized Official of the hospital electronically signs the document (Figure 14). After the Authorized Official has completed the Certification Page, click the Save button on the top righthand side of the page. The Certification is then saved and the date will populate. The final step is submission, see below (Figure 15).

Figure 14. Certification

Figure 15. Save Button

THE FOLLOWING PAGES SHOWS THE FINAL SUBMISSION STEP!

Application will not be submitted unless this step is completed!

APPLICATION SUBMISSION

Once the application is completed, certified and saved by the Authorizing Official, he or she must submit the application within the TDA-GO system. The application then goes from *Application in Progress* to *Application Submitted*.

- In the menu on the left of the page, select **Submit Application**. (Figure 16)
- The system will identify any errors that must be resolved before submitting (Figure 17)
- The system will ask if you are sure—if you are, click OK! (Figure 18)
- The application is **now** submitted. A Status Change Message box will pop up and will say **This Application's status has been updated to Application Submitted** (Figure 19). It will be visible and accessible in your organization's Dashboard in the My Task section. You will also receive an email notification that your application has been submitted.
- After the application due date has passed, the application will enter the reviewing process. Notification of the award will be in the Summer of 2022.

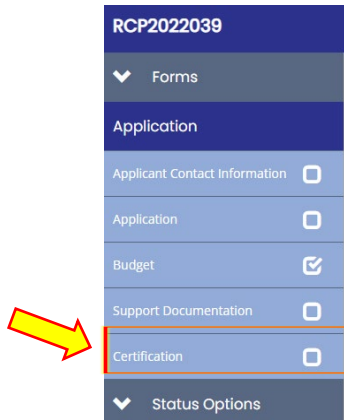


Figure 16. Submit Application Navigation Tab

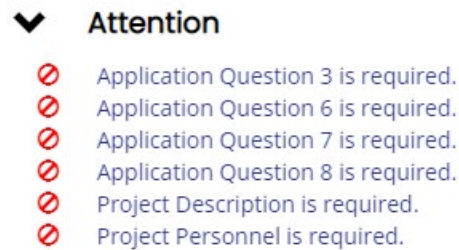


Figure 17. Error Pop-Up Window

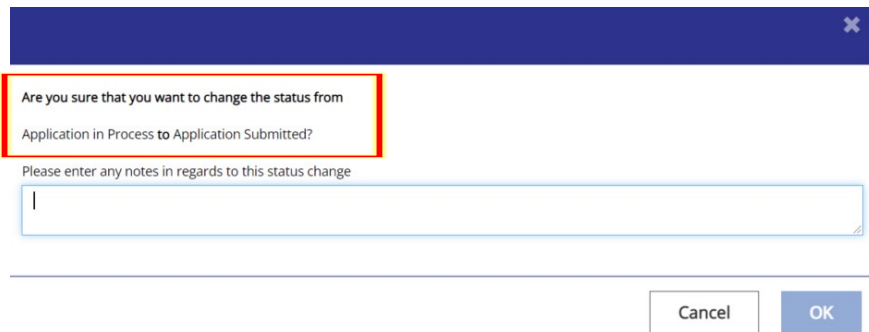


Figure 18. Are You Sure?

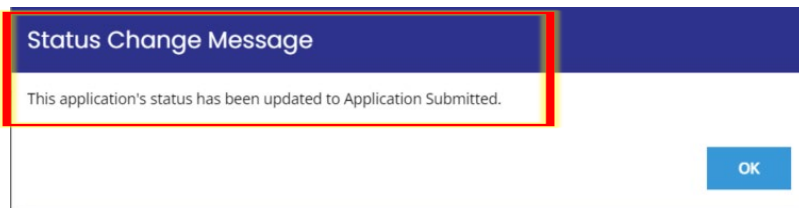


Figure 19. Status Change Message Application Submitted!

NOTE: Applications must be submitted by the opportunity due date, May 16, 2022, 11:59pm. The application will no longer be available in TDA GO after that time. Times identified are based on TDA headquarters (Central Standard Time Zone) and are displayed on your TDA-GO home screen.

Confirmation Email

After submitting your application, you will receive a confirmation email (Figure 20).

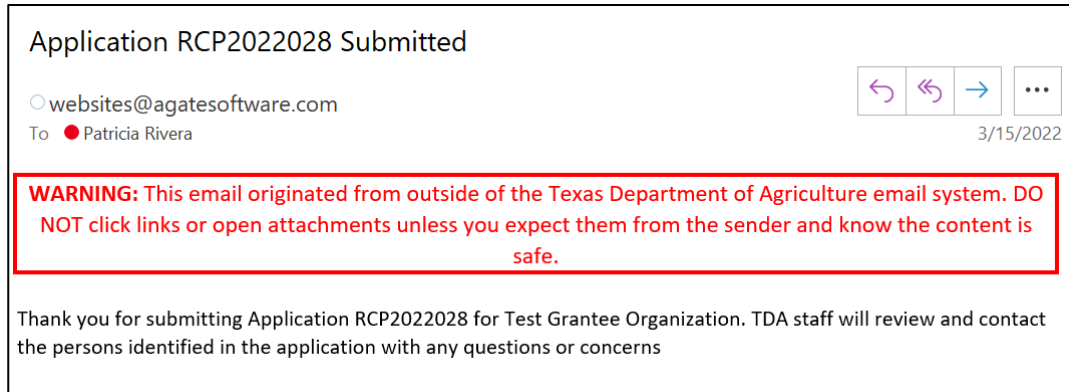


Figure 20. Email Submission Confirmation

APPENDIX

Hospital Roles within the TDA GO! system

- **Authorized Official (AO)** – This role is filled by either the CEO/Administrator or appointed designee and can prepare an application, but is the only person who can certify and submit applications. Once your organization is in the system AOs can assign roles to other staff if necessary.
- **Project Director (PD)** – This role is for the individual who will complete the application, manage the grant award, submit payment requests, etc. They cannot certify or submit applications unless assigned that role by the AO. An AO may assign more than one AO.
- **Secondary Contact** – You may choose to add a staff person to this field. After we set up your organizational profile and you receive your login information, if you deem it necessary you may assign them a role in the system such as PD or AO, or leave them solely as a secondary contact.
- **Please note:** if necessary, one staff person can fill both AO and PD roles.