

**New York State Department of Health
Doctors Across New York Ambulatory Care Program Request for Applications
RFA #1001051045
Questions and Answers**

Question Number	Question	Answer
1.	<p>In the above referenced RFA, an "Applicant" is defined as a sponsoring institution. A "Sponsoring Institution" is further defined as a not for profit entity that has overall responsibility for a program of graduate medical education... This shall include teaching general hospitals, medical schools, consortia and D&TCs." Attachment #10 to the RFA contains a list of Sponsoring Institutions. There is a note on Attachment #10 that states that "The Department may, at its discretion, add institutions to this list at any point during the procurement process." If a not-for-profit general hospital with overall responsibility for a program of graduate medical education does not appear on the list, is it an eligible applicant?</p> <p>A New York general hospital has recently received ACGME approval for a new family practice residency program but does not currently appear on the list of Sponsoring Institutions, must the list be updated to include such hospital in order for it to be an eligible applicant and submit an application? If yes, how does such hospital get on the list?</p>	<p>Yes, the applicant would be eligible if the applicant is a not-for-profit entity that has the overall responsibility for a program of graduate medical education in the United States which has received accreditation from a nationally recognized accreditation body.</p> <p>No, the list does not need to be updated.</p>
2.	How were the sponsoring institutions determined?	Attachment #10 represents ACGME and AOA Sponsoring Institutions. It is not an all inclusive list as other sponsoring institutions will be considered if they meet the requirements outlined in Question # 1.
3.	A medical director at the Hebrew Home for the Aged at Riverdale would like to know if they would qualify. I noticed that they are not on the original list of sponsoring institutions. They are an 870 bed skilled nursing facility	No, this entity is not a sponsoring institution or would qualify as a free-standing ambulatory care site.

	with 10 full-time staff physicians who are very interested in this being an introduction to geriatric medicine.	
4.	We are interested in applying for the recently posted Ambulatory Care Training Program Grant and want to clarify eligibility requirements. We are a free-standing office located in an underserved inner-city community several miles from the closest hospital. Our office is staffed by physicians and we are a dedicated outpatient teaching site for residents and medical students. Our practice is free-standing and not physically attached to a hospital but we are owned by a University Hospital. We want to confirm that we are eligible as a free-standing clinic for participation in this grant.	It will depend on how the office/practice is licensed. If it is under the hospital's Article 28 license then no. However, if it has its own Article 28 license and operating certificate or is a solo or group physician practice then yes.
5.	Has NYS DOH collaborated at all with HRSA's Teaching Health Center (THC) program to develop the RFA? This RFA appears more feasible for internal medicine training programs as it does not require the funded training site to be the ACGME accredited entity as the federal program requires. Not surprisingly, 10/11 funded THC programs in the first year were in Family Medicine.	No, NYS DOH did not collaborate with HRSA's Teaching Health Center (THC) program.
6.	First, the vendor responsibility attestation page, who is responsible for filling it out, because we are a hospital setting? Second what is the difference between operating budget funding request form 2 and 3? Third when filing the application a letter also has to be enclosed?	The vendor responsibility attestation should be completed by an official with the sponsoring institution. Attachment #6 (Form 2) is for personal which includes personnel costs and Attachment #7 (Form 3) is for non-personal services. Letters of current ACGME/AOA accreditation for each resident training program listed in Attachment 1 must be included.
7.	Are private practices included in the definition of "freestanding ambulatory care site"?	Yes.
8.	Who within the sponsoring institution should have primary responsibility for the RFA? The Chief Financial Officer, the Program Director or who?	The person that is qualified to oversee and monitor the program. The application forms should be signed by a person who is authorized to bind the organization to the provisions of the RFA and the application.

9.	<p>On Page 2 of the RFA, would a facility that meets all of the criteria listed under the definition of “Freestanding Ambulatory Care Site”, but is physically located on a Hospital’s campus, be eligible for this program?</p> <p>Can the facility be considered "freestanding" if it is physically separate from the hospital but located on land owned by the hospital?</p>	<p>If it has its own Article 28 license and operating certificate or is a solo or group physician practice then yes. However, if it is under the hospital’s Article 28 license then no.</p> <p>See response above to question #9.</p>
10.	<p>Based on the information in Section E on Page 6 of the RFA, should all proposals have a start date of January 1, 2012 or may we specify a date earlier than this as our preferred start date?</p>	<p>No. Contracts are not expected to be executed until at least January 1, 2012.</p>
11.	<p>Page 6, Section F.2 references quarterly reports that will need to be filled out by the Sponsoring Institution if an application is accepted. Is there an example of the report for facilities to review prior to receiving an award?</p>	<p>No.</p>
12.	<p>In Section II under Definitions, can a freestanding ambulatory care site be utilized if it is affiliated with the hospital but not physically part of the primary facility?</p>	<p>It will depend on what is meant by “affiliated”. If the site is under the hospital’s Article 28 license, then no. However, if these sites are solo or group physician practices, then yes.</p>
13.	<p>Can private physician offices be utilized if they do not serve a medically underserved population ?</p>	<p>Yes. Serving a medically underserved population is a preferred requirement not a minimum eligibility requirement.</p>
14.	<p>When I clicked on your website and then on the request for application for the Ambulatory Care Training Program, I got the message: "File is damaged. Could not be repaired." Can you e-mail it to me or send it to me by surface mail?</p>	<p>You may access the Doctors Across New York Ambulatory Care Training Program Request for Applications (RFA) and application documents at the following website: http://www.health.ny.gov/funding/rfa/1001051045/index.htm If you are still unable to access the file, send an e-mail to gme@health.state.ny.us and one can be mailed to you.</p>
15.	<p>NYHQ has a number of ambulatory care facilities. Can we train residents and/or medical students at these sites or will the medical center need to establish affiliations and/or establish agreements with other health care facilities?</p>	<p>It will depend on how the NYHQ facilities are licensed. If they are under the hospital’s Article 28 license, then no. However, if these sites have their own Article 28 license and operating certificate or are solo or group physician practices, then yes.</p>