New York State
Department of Health
Office of Primary Care and Health Systems Management
Health Care Transformation Group’s

Solicitation of Interest
For
Telehealth Capital Program

Solicitation of Interest
Grants Gateway #: DOH01-THCP-2022
SOI #:18828

KEY DATES

NYS Contract Reporter Release Date: 11/22/2021
Questions Due: 12/06/2021
Questions, Answers and Updates Posted: 12/13/2021
(on or about in the NYS Contract Reporter)
Grants Gateway Opportunity Release Date: 01/04/2022
Applications Due in Grants Gateway: 01/18/2022 by 4:00 PM
(No later than)
County(ies): Statewide
Location: Statewide
Classification Medical & Health Care
Contract Term: 03/01/2022 – 02/28/2023
Opportunity Type Grant or notice of funds availability

DOH Contact Name & Address:

New York State Department of Health
Office of Primary Care and Health Systems Management
Health Care Transformation Group’s
Empire State Plaza, Corning Tower
Albany, New York 12237
megan.prokorym@health.ny.gov
## Contents

I. INTRODUCTION AND OVERVIEW .................................................................................................................. 3
   A. Background and Purpose ......................................................................................................................... 3
   B. Priority Populations and Communities ................................................................................................. 4

II. WHO MAY APPLY ........................................................................................................................................ 5
   A. Minimum Eligibility Requirements ....................................................................................................... 5

III. PROJECT PROPOSAL ..................................................................................................................................... 6
   A. Eligible Project Locations ....................................................................................................................... 6
   B. Eligible Project Expenses ....................................................................................................................... 7
   C. Examples ................................................................................................................................................ 7
   D. Excluded Expenses ................................................................................................................................. 8
   E. Budget .................................................................................................................................................... 8
   F. Additional Proposal Information .......................................................................................................... 8

IV. ADMINISTRATIVE REQUIREMENTS ....................................................................................................... 9
   A. Issuing Agency ........................................................................................................................................ 9
   B. Question and Answer Phase ................................................................................................................... 9
   C. Letter of Interest .................................................................................................................................... 10
   D. Applicant Conference ............................................................................................................................. 10
   E. How to File an Application ..................................................................................................................... 10
   F. Department of Health’s Reserved Rights ............................................................................................... 11
   G. Term of Contract ................................................................................................................................... 12
   H. Payment & Reporting Requirements of Grant Awardees ..................................................................... 12
   I. Minority & Woman-Owned Business Enterprise Requirements .......................................................... 13
   J. Limits on Administrative Expenses and Executive Compensation ...................................................... 14
   K. Vendor Identification Number ................................................................................................................. 15
   L. Vendor Responsibility Questionnaire ....................................................................................................... 15
   M. Vendor Prequalification for Not-for-Profits ............................................................................................ 15
   N. General Specifications ............................................................................................................................. 17

V. COMPLETING THE APPLICATION ...................................................................................................... 18
   A. Application Format and Content .............................................................................................................. 18
   B. Freedom of Information Law .................................................................................................................... 18
   C. Review & Award Process .......................................................................................................................... 18

VI. ATTACHMENTS ........................................................................................................................................ 19
I. INTRODUCTION AND OVERVIEW

The New York State Department of Health (NYSDOH) announces the availability of a total of $1.5 million to provide grants in support of projects that invest in new community infrastructure to expand telehealth access. Funded projects should expand access to telehealth among Medicaid eligible persons, as well as low-income, minority, rural, older, and other underserved communities that lack connectivity, audio-visual or remote patient monitoring devices or private spaces necessary to access telehealth. Projects may include but are not limited to (1) the creation of “community telehealth hubs” that are accessible to underserved communities and contain a private, connected and device-equipped space to facilitate a telehealth encounter; which may be located at such places as a public library, social service agency, food pantry, local health department or homeless shelter; (2) the purchase or renovation of a telehealth-equipped van or similar vehicle; (3) the purchase of telehealth equipment for individual use at an originating site; and/or (4) other innovative activities to increase access to telehealth among communities that experience connectivity gaps.

Private Entity Funding Available

A private entity, Rockefeller Philanthropy Advisors, has also pledged funds of $1.5 million in support of projects that invest in new community infrastructure to expand telehealth access. The private entity will solely administer these funds and any policy and/or policy decisions regarding private funds will be made at the sole discretion of the private entity. The private entity will contact awardees directly about the opportunity to receive additional project support. By submitting an application for a State award, and if you are a successful awardee, you agree to sharing your name, contact information and award amount with the private entity. If you do not agree, you may affirmatively opt-out by checking the appropriate box on Attachment 4 – Application Cover Sheet. Opting out of sharing your contact information with the private entity does not prohibit your eligibility for state funding for this specific opportunity.

A. Background and Purpose

Nationwide and in New York State, telehealth usage is lower among low-income, minority, rural, older and other under-resourced communities.\(^1\)\(^2\)\(^3\) This disparity pre-dated the COVID-19 public health emergency, and has been exacerbated as the pandemic has driven a greater percentage of health care online.\(^4\)\(^5\) Although some of this disparity is due to gaps in digital literacy, desire to access health care services via telehealth, and other behavioral factors, a larger part is due to gaps in physical infrastructure. Well over 20% of New Yorkers, disproportionately those who are already under-served and under-resourced, lack either connectivity, audiovisual devices, or the private spaces necessary to receive services via telehealth where they live.

**Connectivity:** Over 2,000,000 households in New York State lack broadband connections, with 1,500,000 lacking any at-home internet connection such as broadband, satellite, or cellular connections. One million, five hundred thousand households equates to 4,000,000 residents or roughly 20% of all New Yorkers who are unable to access telehealth from home due to a lack of connectivity.\(^6\) Although lack of internet connectivity is

---


thought to disproportionately affect rural residents, a July 2020 EmblemHealth survey found that about 20% of New York City residents lacked regular and adequate internet at home. The true percentage of New Yorkers who lack adequate connectivity to access telehealth may be higher due to the prohibitive cost of connecting to telehealth via cellular minutes/data plans.

Device access: Many New Yorkers lack appropriate audiovisual devices (e.g., laptops, smartphones, video cameras) to fully participate in telehealth or have limited access due to shared devices in the household. In 2018, approximately 10% of households (2,000,000 New Yorkers) lacked a computer, tablet, smartphone, or comparable device. This number is substantially higher amongst under-resourced groups including rural, low-income, and older populations. Even for New Yorkers with adequate residential access to telehealth, many lack specialized remote monitoring devices such as pulse oximeters, automated blood pressure cuffs, and heart rate monitors, that can improve quality of telehealth and enable the use of telehealth for a broader range of care management needs.

Privacy: Beyond technical barriers, many New Yorkers lack the appropriate privacy at home or congregate settings such as homeless shelters to participate in telehealth. New Yorkers may be uncomfortable or unable to candidly discuss their medical needs via telehealth if they lack privacy, especially needs related to mental and behavioral health care.

B. Priority Populations and Communities

Although federal and state initiatives to establish universal broadband seek to address gaps in access to affordable, high-speed internet connections, there is a more immediate need and opportunity for health care providers to invest in new community infrastructure to increase access to telehealth in geographic regions and among populations experiencing connectivity gaps. The 2022 enacted New York State budget eliminated obsolete location requirements by expanding Medicaid reimbursement for services delivered via telehealth regardless of where a patient or client is located. As these barriers are removed, the need for telehealth equipment within communities experiencing connectivity gaps will be increasingly important. This grant seeks to fund health care providers to expand telehealth access to populations experiencing gaps in connectivity due to lack of high-speed internet connection, lack of audio-visual devices and lack of private space for a confidential health care encounter.

---

II. WHO MAY APPLY

A. Minimum Eligibility Requirements

To be considered for an award, applicants must meet **all** of the following minimum eligibility requirements:

- **Must be a legally existing organization capable of entering into a binding Master Grant Contract with NYSDOH**

- **Must be one of the following provider types:**
  - Diagnostic and treatment centers certified or licensed under Article 28 of the Public Health Law (PHL) including local health departments that are licensed Article 28 facilities;
  - Mental health clinics certified or licensed under Article 31 of the Mental Health Law (MHL).
  - Alcohol and substance abuse treatment clinics certified or licensed under Article 32 of the MHL
  - Clinics licensed or granted an operating certificate under Article 16 of the MHL
  - Voluntary Foster Care Agencies providing other limited health-related services as defined in schedule C and D of the 29-I VFCA health facilities license guidelines and licensed under Article 29-I of the PHL

  (Proof of provider type/status must be uploaded into NYS Grants Gateway under Pre-Submission Uploads (Attachment 2). Proof of eligibility includes an uploaded copy of a New York State Operating Certificate for an Article 16, 28, 29-I, 31, or 32 provider organization)

- **Must upload a completed Application Cover Sheet (Attachment 4) under Pre-Submissions uploads. Please Note:** This must be signed by an individual authorized to bind the Eligible Applicant to any Master Grant Contract in the NYS Grants Gateway

- **Must be enrolled as a provider in the New York State Department of Health Medicaid Program.**

- **Must upload a completed Project Proposal (Attachment 3) under Pre-Submissions uploads. Please Note:** The Project Proposal must include an Eligible Project Location that is different from the applicant’s clinic address

- **Must at the time of the SOI application submission, be prequalified in the New York State Grants Gateway, if not exempt.**
III. PROJECT PROPOSAL

A. Eligible Project Locations

To be considered for funding, an applicant must complete and upload Attachment 3: Project Proposal, in the Pre-Submission Uploads section of Grants Gateway. Applicants are encouraged to be innovative in their approach to increase access to services delivered via telehealth in communities and populations experiencing connectivity gaps. The proposed project location(s) must be at least one of the following:

- A patient/client’s private residence;
- Multiple patient/client addresses;
- A congregate living facility such as a homeless shelter, transitional housing program, or group home; OR
- A communal space near public housing or other residential setting;
- A human, health or social service agency such as a local welfare or public services office or program or local health department;
- A local community organization such as a community senior center, food pantry or faith-based community organization;
- A library;
- A fire station;
- A pharmacy;
- Multiple locations served by a mobile van;
- A location other than the clinic or professional office (s) of the applicant where members of a priority population or community live or gather

To be considered for funding, an applicant must identify the primary county where the project location(s) will be located and the corresponding Regional Economic Development Council (https://regionalcouncils.ny.gov) defined in Attachment 1 – Regional Economic Development Council Map. The applicant must also identify the primary geographic region the project will serve. If the Eligible Project Location serves a defined priority population from one primary county, then “county” should be selected. If the priority population is from multiple counties, then “region” should be selected. If the priority population is from multiple regions, then “statewide” should be selected.

An applicant can apply for funding to purchase equipment, complete construction or renovations or other eligible expenses, for use in an Eligible Project Location other than their professional office that best serves the identified population or community. For example, a health care provider (Eligible Applicant) may purchase a
telehealth kiosk (Eligible Project Expense) for use by the public at a library (Eligible Project Location). Where applicable, a letter of support or written permission is required from the partner organizations for use of the project location, to be uploaded in the Pre-Submissions Upload section.

B. Eligible Project Expenses

Expenditures eligible for funding under this grant are expected to be for capital projects to establish a community telehealth hub that will facilitate a private health care encounter and/or equipment such as connected devices capable of secure transmission of patient health information at an Eligible Project Location. Eligible expenses include, but are not limited to:

- The planning or design of the acquisition, construction, demolition, replacement, repair or renovation of a fixed asset or assets, including the preparation and review of plans and specifications including engineering and other services;
- Construction costs;
- Renovation costs;
- Asset acquisitions; and
- Equipment costs for purchase of items such as Bluetooth and Wi-Fi enabled devices and devices that directly connect to the Internet such as a telehealth kiosks or carts, computers, smart phones, tablets, laptops; device peripherals such as web cameras, digital stethoscopes, devices used for remote patient monitoring such as connected blood pressure monitors and pulse-oximeters.

Expenditures eligible for NYSDOH funding under this grant may also include non-capital expenditures such as

- Start-up operating expenses directly related to capital purchases for which funding is being sought under this grant such as voice services and internet connectivity, data plans and Wi-Fi hotspots for use at an Eligible Project Location;
- Software for telehealth platforms and services; and
- Subscription costs with telehealth vendors.

C. Examples

Examples for eligible funding may include, but are not limited to:

1. $0 – <$5,000
   - For the purchase of audio-visual technology such as smartphones, laptops, computers, remote patient monitoring devices and associated expenses (Wi-fi hotspots, data plan minutes, subscription services for
telehealth vendors) for individual use at project location or for use in a van or similar vehicle that may serve a smaller estimate of clients per month (less than or equal to 50 individuals).

2. $5,000 – <$15,000
   • For expenses related to construction and/or renovation projects and the purchase of telehealth equipment and associated expenses to establish a community telehealth hub in a publicly accessible location that may serve a moderate estimate of clients per month (51 – 100 individuals).

3. $15,000 – $25,000
   • For expenses related to the purchase of telehealth kiosks in publicly accessible locations; construction and/or renovation projects and the purchase of telehealth equipment to establish community telehealth hub in publicly accessible location; and the purchase or renovation of a telehealth-equipped van or similar vehicle to reach priority populations in their local communities that may serve a larger estimate of clients per month (over 100 individuals).

Eligible Applicants must identify the total amount of NYSODH funds requested with a description and justification of eligible expenses as well as a discussion of how the expenditure relates to the project.

D. Excluded Expenses

Excluded expenses are not eligible for funding. Excluded expenses include general ongoing operating costs applicable to day-to-day operations and not directly related to the start-up operating costs at the project location for which funding is being sought. Costs not eligible for funding include general ongoing operating expenses such as routine supplies; utilities; operating lease payments; ongoing, routine training and maintenance costs related to IT projects; and employee salaries and benefits.

E. Budget

Applicants are instructed to prepare a budget based on their project proposal. The budget should be entered into the appropriate categories utilizing Attachment 5 - Budget and uploaded under Pre-Submission uploads. Applicants are instructed to include a secondary document under the same Pre-Submissions upload section detailing and justifying how they relate to this Solicitation of Interest’s purpose. Projects cannot exceed $25,000. The budget should include a short description of each item by Budget Category of Expenses to include item numbers, quantities, and unit costs, if applicable. Applicants may use the “Other” Category of Expense for non-capital expenditures and other budget items that may not fit the “Design”, “Acquisition”, “Construction”, or “Administration” categories.

F. Additional Proposal Information

In addition to the information above, the applicants must identify and describe the following information in the Attachment 3 – Project Proposal:

• The specific stakeholder, patient/client, family, or other community groups that were contacted, the manner in which they were engaged (meeting, town hall forum, etc.), and how their feedback was incorporated into the proposed project;
• The priority population for the proposed project; and
• The benefits of the project to the community or communities to be served.
IV. ADMINISTRATIVE REQUIREMENTS

A. Issuing Agency

This SOI is issued by the New York State Department of Health Office of Primary Care and Health Systems Management. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

B. Question and Answer Phase

All substantive questions must be submitted in writing via email to:

New York State Department of Health
Office of Primary Care and Health Systems Management
Health Care Transformation Group
Empire State Plaza, Corning Tower
Albany, New York 12237
megan.prokorym@health.ny.gov

To the degree possible, each inquiry should cite the SOI section and paragraph to which it refers. Questions of a technical nature can also be addressed in writing at the email address listed above. Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.

All questions submitted should state “Telehealth Capital Program” in the subject line. Questions, Answers and Updates will be posted on or about December 13, 2021 in the NYS Contract Reporter.

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the DOH contact listed on the cover of this SOI.

- https://grantsmanagement.ny.gov/resources-grant-applicants
- Grants Gateway Videos: https://grantsmanagement.ny.gov/videos-grant-applicants
- Grants Gateway Team Email: grantsgateway@its.ny.gov
  Phone: 518-474-5595
  Hours: Monday thru Friday 8am to 4pm
  (Application Completion, Policy, Prequalification and Registration questions)
- Agate Technical Support Help Desk
  Phone: 1-800-820-1890
  Hours: Monday thru Friday 8am to 8pm
  Email: helpdesk@agatesoftware.com
  (After hours support w/user-names and lockouts)

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.
This SOI will be posted on the NYS Contract Reporter and opened January 4th, 2022 in the NYS Grants Gateway at: https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx A link provided on the Department's public website at: https://www.health.ny.gov/funding/. Questions and answers, as well as any updates and/or modifications, will be posted in the NYS Contract Reporter and on the Grants Gateway. All such updates will be posted by the date identified on the cover of this SOI.

C. Letter of Interest

Letters of Intent are not a requirement of this Solicitation of Interest.

D. Applicant Conference

An Applicant Conference will not be held for this Solicitation of Interest

E. How to File an Application

Applications must be submitted online via the Grants Gateway by the date and time posted on the cover of this SOI. Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Management website at the following web address: https://grantsmanagement.ny.gov/ and select the “Apply for a Grant” from the Apply & Manage menu. There is also a more detailed “Grants Gateway: Vendor User Guide” available in the documents section under Training & Guidance; For Grant Applicants on this page as well. Training webinars are also provided by the Grants Gateway Team. Dates and times for webinar instruction can be located at the following web address: https://grantsmanagement.ny.gov/live-webinars.

To apply for this opportunity:

1. Log into the Grants Gateway as either a “Grantee” or “Grantee Contract Signatory”.
2. On the Grants Gateway home page, click the “View Opportunities” button”.
3. Use the search fields to locate an opportunity; search by State agency (NYSDOH) or enter the Grant Opportunity name <Telehealth Capital Program >.
4. Click on “Search” button to initiate the search.
5. Click on the name of the Grant Opportunity from the search results grid and then select the “APPLY FOR GRANT OPPORTUNITY” button located bottom left of the Main page of the Grant Opportunity.

Once the application is complete, prospective grantees are strongly encouraged to submit their applications at least 48 hours prior to the due date and time. This will allow 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 applicant’s technical questions and provide technical assistance prior to the application due date and time. Contact information for the Grants Gateway Team is available under Section IV. B. of this SOI.

PLEASE NOTE: Although NYSDOH and the Grants Gateway staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding.

The Grants Gateway will always notify applicants of successful submission. If a prospective grantee does not
get a successful submission message assigning their application a unique ID number, it has not successfully submitted an application. During the application process, please pay particular attention to the following:

- Not-for-profit applicants must be prequalified on the due date for this application submission. Be sure to maintain prequalification status between funding opportunities. Three of a not-for-profit’s essential financial documents - the IRS990, Financial Statement and Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit’s prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the roles “Grantee Contract Signatory” or “Grantee System Administrator” can submit an application.
- Prior to submission, the system will automatically initiate a global error checking process to protect against incomplete applications. An applicant may need to attend to certain parts of the application prior to being able to submit the application successfully. Be sure to allow time after pressing the submit button to clean up any global errors that may arise. You can also run the global error check at any time in the application process. (see p. 68 of the Grants Gateway: Vendor User Guide).
- Grantees should use numbers, letters and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also, be aware of the restriction on file size (10 MB) when uploading documents. Grantees should ensure that any attachments uploaded with their application are not “protected” or “pass-worded” documents.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

<table>
<thead>
<tr>
<th>Role</th>
<th>Create and Maintain User Roles</th>
<th>Initiate Application</th>
<th>Complete Application</th>
<th>Submit Application</th>
<th>Only View the Application</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delegated Admin</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grantee</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grantee Contract Signatory</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Grantee Payment Signatory</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grantee System Administrator</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Grantee View Only</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

PLEASE NOTE: Waiting until the last several days to complete your application online can be dangerous, as you may have technical questions. Beginning the process of applying as soon as possible will produce the best results.

Late applications will not be accepted. Applications will not be accepted via fax, e-mail, hard copy or hand delivery.

F. Department of Health’s Reserved Rights
The Department of Health reserves the right to:

1. Reject any or all applications received in response to this SOI.
2. Withdraw the SOI at any time, at the Department’s sole discretion.
3. Make an award under the SOI in whole or in part.
4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the SOI.
5. Seek clarifications and revisions of applications.
6. Use application information obtained through site visits, management interviews and the state’s investigation of an applicant’s qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency’s request for clarifying information in the course of evaluation and/or selection under the SOI.
7. Prior to application opening, amend the SOI specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to application opening, direct applicants to submit proposal modifications addressing subsequent SOI amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this SOI.
12. Conduct contract negotiations with the next responsible applicant, should the Department be unsuccessful in negotiating with the selected applicant.
13. Utilize any and all ideas submitted with the applications received.
14. Unless otherwise specified in the SOI, every offer is firm and not revocable for a period of 60 days from the bid opening.
15. Waive or modify minor irregularities in applications received after prior notification to the applicant.
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer’s application and/or to determine an offerer’s compliance with the requirements of the SOI.
17. Negotiate with successful applicants within the scope of the SOI in the best interests of the State.
18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the state.

G. Term of Contract

Any State contract resulting from this SOI will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that NYS contracts resulting from this SOI will have the following time period: March 1, 2022 – February 28, 2023. Continued funding throughout this period is contingent upon availability of funding and state budget appropriations. NYSDOH also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Contract for Grants can be found in the Forms Menu once an application to this funding opportunity is started.

H. Payment & Reporting Requirements of Grant Awardees

1. The Department may, at its discretion, make an advance payment to not for profit grant contractors in an amount not to exceed twenty-five (25) percent.
2. The grant contractor will be required to submit monthly invoices and required reports of expenditures through the Grants Gateway to the State’s designated payment office (below) or, if requested by the Department, through the Grants Gateway:

New York State Department of Health
Office of Primary Care and Health Systems Management
Health Care Transformation Group’s
Empire State Plaza, Corning Tower
Albany, New York 12237
megan.prokorym@health.ny.gov

Grant contractors must provide complete and accurate billing invoices in order to receive payment. Billing invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department and the Office of the State Comptroller (OSC). Payment for invoices submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC’s procedures and practices to authorize electronic payments. Authorization forms are available at OSC’s website at: http://www.osc.state.ny.us/epay/index.htm, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. CONTRACTOR acknowledges that it will not receive payment on any claims for reimbursement submitted under this contract if it does not comply with OSC’s electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be: Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Work Plan.

3. The funded grant contractor will be required to submit the following periodic reports at the address above or, in the future, through the Grants Gateway:

- A monthly narrative addressing program implementation, barriers and accomplishments.

I. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health ("NYSDOH") recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the employment of minority group members and women in the performance of NYSDOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study
made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that NYSDOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

**Business Participation Opportunities for MWBEs**

For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of 15% as follows:

1) For Not-for-Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.

2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the budget in total.

The goal on the eligible portion of this contract will be 15% for Minority-Owned Business Enterprises (“MBE”) participation and 0% for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that NYSDOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how NYSDOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: [https://ny.newnycontracts.com](https://ny.newnycontracts.com). The directory is found on this page under “NYS Directory of Certified Firms” and accessed by clicking on the link entitled “Search the Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

By submitting an application, a grantee agrees to complete an MWBE Utilization plan as directed to Attachment 7 in this SOI. NYSDOH will review the submitted MWBE Utilization Plan. If the plan is not accepted, NYSDOH may issue a notice of deficiency. If a notice of deficiency is issued, Grantee agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt. NYSDOH may disqualify a Grantee as being non-responsive under the following circumstances:

a) If a Grantee fails to submit a MWBE Utilization Plan;
b) If a Grantee fails to submit a written remedy to a notice of deficiency;
c) If a Grantee fails to submit a request for waiver (if applicable); or
d) If NYSDOH determines that the Grantee has failed to document good-faith efforts to meet the established NYSDOH MWBE participation goals for the procurement.

In addition, successful awardees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

**J. Limits on Administrative Expenses and Executive Compensation**

On July 1, 2013, limitations on administrative expenses and executive compensation contained within Governor Cuomo’s Executive Order #38 and related regulations published by the Department (Part 1002 to 10 NYCRR –
Limits on Administrative Expenses and Executive Compensation) went into effect. Applicants agree that all state funds dispersed under this procurement will, if applicable to them, be bound by the terms, conditions, obligations and regulations promulgated by the Department. To provide assistance with compliance regarding Executive Order #38 and the related regulations, please refer to the Executive Order #38 website at: http://executiveorder38.ny.gov.

K. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award and in order to initiate a contract with the New York State Department of Health, vendors must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, please include the Vendor Identification number on the application cover sheet. If not enrolled, to request assignment of a Vendor Identification number, please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at: https://www.osc.state.ny.us/files/vendors/2017-11/vendor-form-ac3237s-fe.pdf

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at itservicedesk@sfs.ny.gov.

L. Vendor Responsibility Questionnaire

The New York State Department of Health strongly encourages that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. The Vendor Responsibility Questionnaire must be updated and certified every six (6) months. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at https://www.osc.state.ny.us/state-vendors/vendrep/file-your-vendor-responsibility-questionnaire or go directly to the VendRep system online at https://www.osc.state.ny.us/state-vendors/vendrep/vendrep-system.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at itservicedesk@osc.ny.gov.

Applicants opting to complete online should complete and upload the Vendor Responsibility Attestation (Attachment 7) of the RFA. The Attestation is located under Pre-Submission uploads and once completed should be uploaded in the same section.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, and upload it with their Application in the Pre-Submission uploads section in place of the Attestation.

M. Vendor Prequalification for Not-for-Profits

All not-for-profit vendors subject to prequalification are required to prequalify prior to grant application and execution of contracts.
Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, New York State has instituted key reform initiatives to the grant contract process which requires not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the Grants Management Website.

Applications received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the application due date listed on the cover of this SOI cannot be evaluated. Such applications will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor Prequalification Manual on the Grants Management Website details the requirements and an online tutorial are available to walk users through the process.

1) **Register for the Grants Gateway**
   - On the Grants Management Website, download a copy of the Registration Form for Administrator. A signed, notarized original form must be sent to the NYS Grants Management office at the address provided in the submission instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

     If you have previously registered and do not know your Username, please email grantsgateway@its.ny.gov. If you do not know your Password, please click the Forgot Password link from the main log in page and follow the prompts.

2) **Complete your Prequalification Application**
   - Log in to the Grants Gateway. If this is your first time logging in, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.

   - Click the Organization(s) link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A Document Vault link will become available near the top of the page. Click this link to access the main Document Vault page.

   - Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.

   - Specific questions about the prequalification process should be referred to your agency representative or to the Grants Gateway Team at grantsgateway@its.ny.gov.

3) **Submit Your Prequalification Application**
   - After completing your Prequalification Application, click the *Submit Document Vault* Link located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.

   - If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.
• Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

**Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.**

**N. General Specifications**

1. By submitting the "Application Form", each applicant attests to its express authority to sign on behalf of the applicant.

2. Contractors will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.

3. Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this SOI, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (Section IV.B.) must be clearly noted in a cover letter included with the application.

4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.

5. **Provisions Upon Default**

   a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this SOI.

   b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this SOI, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.

   c. If, in the judgment of the Department, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department, acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this SOI by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

6. Applicant must maintain an active registration in the System for Award Management (SAM) at SAM.gov, have no exclusions or delinquent federal debt.
V. COMPLETING THE APPLICATION

A. Application Format and Content

Please refer to the Grants Gateway: Vendor User Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Management website at: https://grantsmanagement.ny.gov/vendor-user-manual. Additional information for applicants is available at: https://grantsmanagement.ny.gov/resources-grant-applicants.

Also, you must use Internet Explorer (11 or higher) or Microsoft Edge to access the Grants Gateway. Using Chrome or Firefox causes errors in the Work Plan section of the application.

Please respond to each of the sections described below when completing the Grants Gateway online application. Your responses comprise your application. Please respond to all items within each section. When responding to the statements and questions, be mindful that application reviewers may not be familiar with the agency and its services. Therefore, answers should be specific, succinct and responsive to the statements and questions as outlined.

B. Freedom of Information Law

All applications may be disclosed or used by NYSDOH to the extent permitted by law. NYSDOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. Any portion of the application that an applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the application. If NYSDOH agrees with the proprietary claim, the designated portion of the application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

Each application will be reviewed by NYSDOH based on pass/fail award criteria. Applications that pass the specified pass/fail evaluation criteria will be funded on a “first in/first funded” basis in each Regional Economic Development Council region. Applicants are encouraged to submit their application as close to the beginning of the NYS Grants Gateway release date (indicated on cover page of this SOI), due to this first in/first funded basis. To achieve a fair geographic distribution of funding, all eligible applications will be assigned to one of ten Regional Economic Development Council regions (https://regionalcouncils.ny.gov) based on the primary county where the proposed project would be located, not the county of the address of the Eligible Applicant. $150,000 in awards will be assigned to each Regional Economic Development Council region of the state to promote statewide geographic distribution and funding in upstate and rural regions.

Applications will be due over a 2-week period and will be date and time stamped in Grants Gateway. Requests for more than one type of project, even if total amounts across projects is under $25,000, are not allowed. If an application is submitted for a project that is over $25,000, the application will automatically fail.

Proposed projects should be based on the needs and connectivity gaps experienced by the identified population to be served. Each application will be considered on its own merits against pass/fail criteria.
To be awarded, an applicant must meet the Minimum Qualifications as noted in Section II. A. Awards will initially be made to the first received eligible applications in each of the 10 Regional Economic Development Councils, then the second in each region, and so on, until $150,000 of awards is made in each region.

If $150,000 in awards is not reached in an individual region after all regional awards have been determined including partial award(s), the balance in a region will be awarded to the next successful applicant in an adjacent region based on eligible applicant order of submission. If there are no adjacent eligible applicants available, the Department reserves the right to redistribute the funds to any eligible applicant in the order in which their application was received in the NYS Grants Gateway.

Partial Award(s): When funding has been depleted to a level such that a project’s total requested funding amount cannot be met in an individual region, the eligible applicant will be offered a partial award amount. If the eligible applicant declines that amount, the next eligible applicant in that region will be offered a partial award. Partial awards will continue to be offered until all eligible applicants in the region have either declined or there is no longer a next eligible applicant that is proposing a project in the individual region, at which point, the Department reserves the right to redistribute the funds to any other region that was not funded in its entirety.

Funding for this project is contingent on the availability of State funds and the number of Eligible Applicants that respond to the advertisement. Available funding to support this initiative will be limited to the amount(s) appropriate in the enacted State Fiscal Year budgets for this purpose.

This advertisement is not a guarantee or promise of funding. The Department reserves the right to withdraw this solicitation and/or issue a competitive procurement for this project if the number of interested and eligible parties exceed that which can be reasonably accommodated by available funds.

VI. ATTACHMENTS

Please note that certain attachments are accessed under the “Pre-Submission Uploads” section of an online application and are not included in the SOI document. In order to access the online application and other required documents such as the attachments, prospective applicants must be registered and logged into the NYS Grants Gateway in the user role of either a “Grantee” or a “Grantee Contract Signatory”.

Attachment 1: Regional Economic Development Council Map*
Attachment 2: Proof of Status*
Attachment 3: Project Proposal*
Attachment 4: Application Cover Sheet*
Attachment 5: Telehealth SOI Budget*
Attachment 6: MWBE Utilization Forms*
Attachment 7: VR Attestation*
Attachment 8: Letter of Support*

*These attachments are located / included in the Pre-Submission Upload section of the Grants Gateway online Application.
**These attachments are attached to the SOI and are for applicant information only. These attachments do not need to be completed,