

Improving Health Care Workforce Wellness: A Pilot to Reduce EMR Burden

Frequently Asked Questions (FAQ)

1. *Is the grantee responsible for implementing a subgrantee selection process beyond determining eligibility, or will DC Health be determining the subgrantees? The RFA mentions responsibility for reviewing/validating eligibility and managing fund disbursement, but is not explicit that the grantee will design, oversee and administer a subgrantee selection process.*

The grantee shall design, oversee, and administer a process for ensuring subgrantee applicants meet DC Health-defined eligibility requirements (outlined below) and managing fund disbursement.

All subgrantee applicants meeting eligibility requirements shall receive funding, until available funds are exhausted.

Sub-awardee eligibility requirements:

- Outpatient ambulatory health site providing primary medical care or outpatient clinical sites located in a Primary Care Health Professional Shortage Area (can be verified through HRSA Data Warehouse [\[link\]](#))
- Provides primary care to underserv8/30/20238/30/2023 12:48:32 PMed populations, as evidenced by forty-five percent or greater of site's primary care encounter volume allocated to Department of Health Care Finance
- Must have a DC Business License issued by the Department of Licensing and Consumer Protection

2. *Is the organizational chart meant to describe the entire organization's structure, or just that of the project?*

The organizational chart should be project-specific.

3. *Some of the various insurances indicated in Appendix A (such as A7) state that "The Grantee shall provide evidence satisfactory to the PM with respect to the services performed. . ." Does that mean that post-award but prior to start of the project, certain insurance levels may be negotiated and/or finalized based on the services to be performed? Or are all indicated insurance levels absolutely required to be included in the Certificate of Insurance submitted with the application?*

Every applicant is required to provide a certificate of insurance and a copy of their cyber liability as part of the application. Should the applicant be awarded the grant, a compliance review will occur upon the issuance of the NOGA. Coverages may be discussed with the Office of Risk Management and will be based on the grantee's exposures. However, it is recommended to provide Appendix A to any applicant's insurance broker so they may have an understanding of what expectations are for DC Health grantees.