



# Wyoming Department of Health

Funding Opportunity Announcement:  
Health and Human Services (HHS) Capital Construction and  
Provider Relief Grant  
(DO-22-002)

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## Funding Opportunity Announcement:

### Health and Human Services (HHS) Capital Improvement and Provider Relief Grant (DO-22-002)

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1. Overview Information

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| <b>Participating Organization(s)</b>                 | Wyoming Department of Health (WDH)  |
| <b>Components of Participating Organization(s)</b>   | WDH, Director's Office  |
| <b>Funding Opportunity Title</b>                     | Health and Human Services (HHS) Capital Improvement and Provider Relief Grant   |
| <b>Funding Opportunity Announcement (FOA) Number</b> | DO-22-002   |
| <b>Announcement Type</b>                             | New   |
| <b>Number of Applicants</b>                          | No limit  |
| <b>Funding Opportunity Purpose</b>                   | <p>The WDH's mission is to promote, protect, and enhance the health of all Wyoming citizens.</p> <p>In 2022, the Wyoming Legislature appropriated \$5,000,000 of American Rescue Plan Act (ARPA) direct funds to the WDH for the HHS Capital Improvement and Provider Relief Fund. This appropriation is "for purposes of providing grants to health and human services providers to improve existing infrastructure and to provide financial relief to providers who are at imminent risk of closure"</p> <p>This Funding Opportunity Announcement (FOA) invites applications to receive grants from the HHS Capital Improvement and Provider Relief Fund.</p> <p>Applications will be divided into two categories, Type I or Type II, which must propose either:</p> <ul style="list-style-type: none"> <li>● Type I - Capital Improvements: a minor capital improvement project to be funded; or</li> <li>● Type II - Provider Relief: a justified amount of grant relief that will prevent an imminent risk of closure.</li> </ul> <p>The WDH will award grants of up to \$500,000 each from the HHS Capital Improvement and Provider Relief Fund. Depending on the</p> |

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|  | <p>application type, applications will be reviewed and scored by one of two advisory committees. Awardees will be selected amongst the highest-scoring applications. The final award amounts and count of awards will be subject to the Director’s discretion. At all times, the WDH reserves the discretion to award zero (0) grants.</p> <p>All grants awarded under this FOA are subject to the terms and conditions imposed upon the Coronavirus State and Local Fiscal Recovery Funds (SLFRF) Program under ARPA.</p> <p>Before applying, applicants are encouraged to consult the SLFRF final rule at 31 C.F.R. Part 35 (link <a href="#">here</a>), as well as guidance issued by the U.S. Department of the Treasury (link <a href="#">here</a>). Each applicant will be required to establish how their project qualifies as an eligible use of SLFRF funds.</p> |
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| <b>Key Dates</b>                               |  |
| Posted Date                                    | June 6, 2022   |
| Open Date<br>(Earliest Submission Date)        | July 1, 2022   |
| Application Due Date<br>(Last Submission Date) | September 1, 2022  |
| Advisory Committee Review                      | Generally, two months after receipt date   |
| Earliest Start Date                            | Generally, two months after advisory council review date and subject to state contracting and vendor management requirements |
| Expiration Date                                | December 31, 2026  |

## 2. Full Text Announcement

### A. Funding Opportunity Description

#### i. Purpose

This Funding Opportunity Announcement (FOA) invites two types of applications for the Capital Improvement & Provider Relief Grant.

1. Type I - Capital Improvement applications will be for minor capital improvements that improve health provider capacity and resilience against infectious diseases like COVID-19.
2. Type II - Provider Relief applications will be to prevent the imminent risk of closure of providers due to effects of the COVID-19 pandemic.

Awardees will receive funding for approved projects up to December 31, 2026.

#### ii. Background

The healthcare ecosystem is rapidly changing, nationally and in Wyoming. These changes have only been exacerbated by the COVID-19 public health emergency. In order to respond to and recover from the COVID-19 public health emergency, the Coronavirus State and Local Fiscal Recovery Funds (SLFRF) Program, as part of the American Rescue Plan Act (ARPA), delivers \$350 billion to state, local, and Tribal governments across the country.

The SLFRF Program ensures that governments have the resources needed to:

- Fight the pandemic, and support families and businesses struggling with its public health and economic impacts.
- Maintain vital public services, even amid declines in revenue.
- Build a strong, resilient, and equitable recovery by making investments that support long-term growth and opportunity.

During the 2022 Budget Session of the Wyoming Legislature, the Legislature appropriated funds from the SLFRF Program directly to state agencies for various purposes. *See* 2022 Wyo. Sess. Laws 109 (ch. 50). The Legislature refers to these funds as American Rescue Plan Direct (ARPD) appropriations.

This FOA regards the \$5,000,000 ARPD appropriation to the WDH for the HHS Capital Improvement and Provider Relief Grant. *See* 2022 Wyo. Sess. Laws 109, 110 (ch. 50, § 2). The Legislature directed:

This appropriation to the department of health is for purposes of providing grants to health and human services providers to improve existing infrastructure and to provide financial relief to providers who are at imminent risk of closure. Grants shall be distributed to providers as determined by the department.

2022 Wyo. Sess. Laws 109, 113 (ch. 50, § 2, fn. 13). Accordingly, the WDH has created the HHS Capital Improvement and Provider Relief Grant, as represented through this FOA.

**iii. Objective and Scope**

The objective of this FOA is to fund two types of grants. These include Type I - Capital Improvements, which will assist HHS providers in improving existing infrastructure; and Type II - Provider Relief grants which will provide relief to providers at imminent risk of closure.

In addition to the conditions imposed by the Legislature, projects under this FOA are limited by federal law. The \$5,000,000 available through the HHS Capital Construction and Provider Relief Fund are funded by the SLFRF Program. The U.S. Treasury has adopted a final rule controlling the use of these funds under 31 C.F.R. Part 35. Each application will need to expressly establish how the proposed project is permitted to be funded under the final rule.

**B. Award Information**

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| <b>Funding Instrument</b>                               | Monetary grant: a support mechanism providing money to an eligible entity to carry out an approved project or activity  |
| <b>Anticipated Number of Awards and Funds Available</b> | Awards of up to \$500,000 each are available out of the \$5,000,000 HHS Innovation Fund. The total number of awards will be determined by funding availability, the number of applications submitted, and the quality of those applications. As noted in this FOA, the WDH reserves the right to award zero (0) grants and expend zero (0) dollars. |
| <b>Award Budget</b>                                     | Funds may be used only for those expenses that are directly related and necessary to the project and must be expended in compliance with 31 C.F.R. Part 35.   |
| <b>Award Project Period</b>                             | The duration of the entire award may not exceed beyond December 31, 2026. All funds must be spent by December 31, 2026.   |

**C. Eligibility Information**

Any entity legally-authorized to operate in Wyoming is eligible to apply.

**D. Application and Submission Information**

There is no application form or template. However, each application must include certain elements. These elements depend on the nature of the application, either Type I - Capital Improvement or Type II - Provider Relief.

A Type I - Capital Improvement application must include:

1. Cover Page
  - a. Identify or name the entity submitting the application.
  - b. Provide a brief description and purpose of the capital improvement, in no more than three to five sentences.

- c. Identify a point of contact for the application, including name, position/title, address, phone number, and email address.
2. Entity Information
  - a. Provide the entity's mission statement.
  - b. Provide a brief history of the entity.
  - c. Describe the entity's current programs and activities.
  - d. Provide the entity's IRS Employer Identification Number (EIN).
  - e. Provide a Certificate of Good Standing from the Secretary of State.
  - f. List the Board of Directors, or other relevant leadership.
3. Capital Improvement Proposal
  - a. Describe the capital improvement.
  - b. Describe how the capital improvement either:
    - i. Will improve resilience against infectious diseases like COVID-19; or
    - ii. Is otherwise eligible under the SLFRF Program. This description must include the following elements:
      1. An analysis of how the project is permitted under the relevant U.S. Treasury regulations, located at 31 C.F.R. Part 35.
      2. Pincite(s) to the specific provision under the relevant U.S. Treasury regulations, located at 31 C.F.R. Part 35, applied above (e.g. "31 C.F.R. § 35.6(b)(3)(ii)(11)(i)").
  - c. Provide a detailed timeline of the capital improvement that shows major milestones.
  - d. Describe the budget for the project, including funding sources, allocations, and any relevant restrictions on the use of funds – outside of the SLFRF Program. Attach supporting documentation as appropriate.
  - e. Describe the plan for capital maintenance after the grant award has been exhausted.
  - f. Attach any supplementary documents which may be valuable to the review and selection process.

A Type II - Provider Relief application must include:

1. Cover Page
  - a. Identify or name the entity submitting the application.
  - b. Identify a point of contact for the application, including name, position/title, address, phone number, and email address.
2. Entity Information
  - a. Provide the entity's mission statement.
  - b. Provide a brief history of the entity.
  - c. Provide the entity's IRS Employer Identification Number (EIN).
  - d. List the Board of Directors, or other relevant leadership.
3. Provider Relief Proposal
  - a. Describe how your organization is at imminent risk of closure. Substantiate this assertion with appropriate financial documentation (i.e., balance sheets, audited financial statements).
  - b. Describe why (i.e., the principal cause behind) your organization is at imminent risk of closure. Substantiate this cause with appropriate financial or other documentation.

- c. Describe how the project is eligible under the SLFRF Program. This description must include the following elements:
  - i. An analysis of how the project is permitted under the relevant U.S. Treasury regulations, located at 31 C.F.R. Part 35.
  - ii. Pincite(s) to the specific provision under the relevant U.S. Treasury regulations, located at 31 C.F.R. Part 35, applied above (e.g. “31 C.F.R. § 35.6(b)(3)(ii)(11)(i)”).

Applicants are encouraged to format their applications in a manner that reflects the enumerated elements above. For example, the application should provide the entity’s IRS EIN under section or paragraph “2.d,” or a reasonable alternative. This will assist the review to ensure the application is complete. Please be advised if an application is not well-organized, does not clearly address all of the enumerated elements above, or is otherwise of a lower quality, the application may receive a lower score compared to other submissions and thus may not be funded.

Each application must be submitted to the WDH via email at [wdh.hhs.caprelief@wyo.gov](mailto:wdh.hhs.caprelief@wyo.gov). Applications may be submitted no later than Thursday, September 1, 2022.

## **E. Application Review and Selection Information**

Depending on the type, each application will be reviewed and scored by two separate advisory committees established by the WDH. Type I applications will be scored by a committee with expertise in capital construction. Type II applications will be reviewed and scored by a committee with financial management expertise. The scoring of applications will be based on a rubric that accounts for how well the application satisfies the elements established under this FOA.

The Director will review the highest-scoring applications and independently select awardees based upon the purpose and objectives of the SLFRF Program and the HHS Capital Improvement and Provider Relief Fund. Since the WDH must be a responsible steward of taxpayer funds, the Director reserves the right to not award any grants, in the event the Director determines there are insufficient applications of merit.

## **F. Award Administration Information**

All grants awarded under this FOA are subject to the terms and conditions imposed upon the SLFRF Program. All grants are also subject to State of Wyoming contracting and vendor management requirements

## **G. Agency Contacts**

Questions regarding this FOA may be submitted to [wdh.hhs.caprelief@wyo.gov](mailto:wdh.hhs.caprelief@wyo.gov).

## **H. Right to Amend or Withdraw**

At all times, the WDH reserves the right to amend or withdraw this FOA. In the event the WDH substantially changes application criteria and an applicant has already submitted an application, the WDH will provide the applicant notice of the change and an opportunity to supplement the application, as necessary.