TITLE 402 NEBRASKA HEALTH CARE FUNDING ACT

CHAPTER 2 GRANTS FROM THE NEBRASKA HEALTH CARE CASH FUND

2-001 Scope and Authority: These regulations govern the grants made from the Nebraska Health Care Cash Fund. The regulations implement Neb. Rev. Stat. Section 71-7614 by establishing the application process for grants, the criteria for reviewing the grants, and other procedures necessary for the proper administration of these grants.

2-002 Definitions:

Department means the Nebraska Department of Health and Human Services Finance and Support.

Nebraska Health Care Council means the nine member council that was created under Neb. Rev. Stat. Section 71-7614. The Director of the Department of Health and Human Services Finance and Support is an ex-officio member.

2-003 Purpose: The purpose of the Nebraska Health Care Cash Fund is to award grants in the following categories:

1. Public Health: This category includes projects that promote physical and mental health, or prevent disease, injury, disability, and premature death:
   a. Health education programs and activities to promote health and prevent disease, including:
      (1) Prenatal care;
      (2) Proper nutrition and physical activity;
      (3) Substance abuse prevention;
      (4) Smoking prevention and cessation; or
      (5) Other similar projects;
   b. Environmental health services, including:
      (1) Lead testing and abatement;
      (2) Clean water;
      (3) Clean air;
      (4) Mercury recycling;
      (5) Other similar projects;
   c. Tests and screening services, including:
      (1) Heart disease;
      (2) Communicable diseases;
      (3) Breast and cervical cancer;
      (4) Diabetes;
      (5) Other similar projects;
   d. Public health infrastructure activities, including:
      (1) Training and education for the public health work force and local boards of health;
(2) Hiring of school nurses;
(3) Potential bio-terrorist treats and other public health emergencies;
(4) Assessment of health needs, policy development to meet those needs, and assurance that those needs are being met; or
(5) Other similar activities;

2. Health Service System Improvements: This category includes projects that focus on improving access to high quality health care services for both rural and urban underserved populations, such as racial and ethnic minorities, the elderly, and low-income families. The goals of these projects are to improve patient outcomes by reducing access barriers, such as geographic, language, cultural, and transportation, and to improve the quality of health care services through disease management and quality improvement efforts. This category includes projects in the following areas:
   a. Reducing the shortage of health personnel by enhancing training programs or developing innovative methods of training;
   b. Changing and improving the practice environment in communities to enhance efforts to recruit and retain health professionals;
   c. Developing and expanding community-based mental health services to meet the needs of the community;
   d. Developing innovative cultural competency programs and reducing language barriers;
   e. Improving the quality of care through disease management and quality improvement programs;
   f. Improving the capacity and operation of emergency medical services (EMS) and the statewide trauma system;
   g. Improving communication systems for patient referrals and transfers, and enhancing telehealth capabilities; or
   h. Developing and expanding community-based aging services that promote independent living status and delay institutional care.

2-003.01 Limitations

2-003.01A No grant funds shall be used for abortion, abortion counseling, referral for abortion, or school-based health clinics.

2-003.01B These regulations do not create an entitlement to any funds available for grants.

2-003.01C Projects funded by the Nebraska Health Care Cash Fund shall not include permanent, ongoing programs unless approved by the Legislature. The Department or the Nebraska Health Care Council may recommend projects to the Legislature for establishment as permanent, ongoing programs to be funded from the Nebraska Health Care Cash Fund. Permanent, ongoing programs approved by the Legislature shall be fully funded on an annual basis prior to the use of the Nebraska Health Care Cash Fund for any other project funded from the Nebraska Health Care Cash Fund.
2-003.01D No project shall receive funding for more than three years through such grants unless the council determines that unusual circumstances dictate the need for an extension of funding. Extension shall be granted for no more than one year at a time and shall be reported by the Department to the Health and Human Services Committee of the Legislature.

2-004 Eligibility: Preference will be given to applications from governmental agencies (local, county, state), educational institutions, quasi-governmental entities, or tax-exempt institutions. Proof of the agency’s tax-exempt status must be included as part of the application. A for-profit entity cannot be the primary beneficiary of the grant funds, but it can be a member of a coalition that is applying for funding.

2-005 Funding Available: Grants are available from the Nebraska Health Care Cash Fund. The minimum grant amount is $10,000.

2-006 Application Process: The Department will establish an application period for each grant cycle. Procedural details for the application process will be specified in the application packet for each grant cycle, distributed by the Department.

2-007 Grant Approval Criteria: The Nebraska Health Care Council may award grants to the extent funds are available and, within its discretion, the extent applications are approved. For each grant cycle, the Nebraska Health Care Council, with the approval of the Director of Finance and Support, shall award grants based on the following criteria identified in each proposal:

1. The problem(s) and the needs the project will address;
   a. The number of people who will benefit from the project, the target population, and the current barriers (e.g., availability, accessibility, cultural, etc.) that exist;
   b. How the project will result in a significant improvement in health status. All public health proposals must identify appropriate national Healthy People 2010 Objectives;
   c. Past efforts by your agency or other agencies to address these problems and whether this project is a continuation of an existing program;
   d. If appropriate, any disparities in health outcomes for minority populations; and
   e. The major categories of the project;
2. The purpose or major goals of the project;
3. The intervention strategy and the project design, including how problems and barriers will be overcome;
   a. A work plan that contains specific measurable objectives and the activities under each objective. Are the activities outlined in the work plan effective strategies for addressing the problems and needs? Do the project activities demonstrate a cost-effective use of grant funds? If appropriate, do project activities address disparities in minority health outcomes?
b. For each activity, when each activity (task) will be completed, who will be responsible for completing it, and what products or accomplishments will result from the activities undertaken;

c. The agencies or community groups that will be involved in the project and their roles, responsibilities, and commitments;

d. Why this project is the preferred or best approach;

e. The mechanisms that will be used to finance and sustain the strategy at the end of the grant period;

4. The lead agency’s and the collaborating agencies’ capabilities and support for this project. (Letters of support should be included.);

5. The qualifications and experience of the project director and the key staff people;

6. Community involvement, including persons from diverse cultures, in developing the proposal;

7. The measures that will be used to evaluate the project;

8. The methods/strategies that will be used to determine the project’s effectiveness;

9. How the results of the evaluation will be disseminated and communicated;

10. An itemized budget and a budget narrative that supports the need for each budget item;
   a. The staffing is adequate to carry out the goals and objectives of the project;
   b. The budget identifies in-kind and other sources of funding; and
   c. The project produces benefits commensurate with its cost.

2-008 Award Priority: The Nebraska Health Care Council may establish priority categories for grant awards (see 402 NAC 2-003).

2-009 Contract Documents: Grants awarded to eligible applicants by the Nebraska Health Care Council are subject to Neb. Rev. Stat. Section 71-7614 and 402 NAC 2. The request for applications, the approved application, the notice of award, and any amendments to these documents as approved by the Council constitute the contract documents governing the grant.

2-010 Terms and Conditions: By submitting an application for a grant under the Nebraska Health Care Cash Fund, the applicant agrees to the following terms and conditions:

1. The grantee shall expend the funds awarded by the Nebraska Health Care Council only in accordance with the costs in the approved application.

2. Funds will be distributed in the form of an outright grant or a matching grant. Grant funds will be distributed in equal amounts every six months unless the applicant provides a justification for an alternative funding cycle.

3. Grantees shall submit narrative and financial reports every six months. At the close of each grant, project directors shall provide a written report on the project and its findings.

4. Grantees shall have and implement a drug-free workplace policy.