

Primary Care Provider Grants Frequently Asked Questions (FAQ)

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Grant Program Overview

Primary Care Provider Grants are the Health Plan of San Mateo's (HPSM's) first set of grants launching as part of our larger Primary Care Investment Strategy. To address the primary care crisis, particularly workforce shortages, bandwidth and burnout, and to lay the groundwork for advanced primary care, HPSM is unveiling four grants aimed to bolster the 3Rs – recruitment, retention, and resilience, of primary care teams across our network.

Each grant has its own terms and agreements, including eligibility requirements, allowable expenses, maximum awards, stipulations and decision periods. Grants will be available through 2028 (or until funds run out). The four grant types available are:

1. **Primary Care Team Expansion Grant:** Hire and integrate new interprofessional team members
2. **Core Team Stabilization Grant:** Recruit and retain primary care providers and medical assistants.
3. **Provider Sabbatical Grant:** Retain providers by enhancing resilience through a paid sabbatical.
4. **Custom Pilot Program Grant:** Design pilots and programs that improve primary care team capacity, bandwidth and joy.

General Program Questions

1. *Who is eligible for a grant?*

- Each grant has its own terms and agreements, including eligibility requirements, allowable expenses, maximum awards, stipulations and decision periods. Generally, any medical practice or group with an active HPSM contract for primary care services may apply for a grant. The grant must be used to support the primary care team. Please see the [Primary Care Provider Grants page](#) for more information.

2. *How do I apply for a grant?*

- Please visit the online grant application to apply for a grant. If you have any questions on the grant application, please reach out to grants@hpsm.org.

3. *Are there limits for the number of grants or the amount of funds an organization can apply for?*

- There is no limit to the number of grants an organization can apply for within the 4-year grant period. Award amounts will be based on the type of grant, terms of the application, and budget.

4. *How are grant amounts determined?*

- HPSM's decisions on final award amounts are determined based on several criteria, including grant specifications and allowable expenses, applicants' budget proposal, alignment with the goals of HPSM's Primary Care Investment Strategy, organizational capacity and utilization volume, and remaining funds available.

5. *How will my application be reviewed by HPSM?*

- An internal review committee will review all applications and notify applicants of a decision within 30 days for Core Team Stabilization and Provider Sabbatical grants and within 90 days for the Primary Care Team Expansion and Custom Pilot grants. Review criteria include:
 - Impact to HPSM member access and/or
 - Impact to primary care team capacity, bandwidth, and joy.

We will also consider:

- The appropriateness of HPSM as the funder for the application.
- Appropriateness of the request by the provider.
- The organization's ability to financially sustain the investment OR test and evaluate something new.

6. *How can I rescind or modify a grant application?*

- Please contact grants@hpsm.org to rescind or request modification to a grant application.

7. *What are the application deadlines?*

- HPSM accepts applications on a rolling basis without deadlines. Grants will be available through 2028 or until funds run out.

8. *Can multiple organizations apply together to collaborate on a grant?*

- Yes, and to promote collaboration among organizations, HPSM will provide additional dollars to practices who share positions or programs.

9. *When are dollars distributed to grantee organizations?*

- HPSM provides the award amount in a single lump sum upon approval of the grant application and execution of a signed Memorandum of Understanding (MOU) agreement. Organizations will be asked to report on the outcomes of the grant funding.

10. *How will HPSM monitor milestone completion after grant distribution?*

- HPSM oversight of milestone completion varies by grant type and award. HPSM will collect relevant information for evaluation of grant awards, with the type and frequency of reporting and attestation to be defined in a MOU.

11. *Can I only use grant funds for services to HPSM members?*

- No, but there must be a demonstrated impact to HPSM member access or upstream factors like provider capacity, bandwidth, and joy for providers who serve HPSM members.

12. *Who can I contact with questions?*

- Please contact grants@hpsm.org and allow up to five business days for a response.

Primary Care Team Expansion

13. Does the person hired for the position need to be new to the primary care network?

- The new hire must be new to the role in the HPSM Medi-Cal network. Backfills of existing positions are not eligible.

14. Will HPSM only fund organizations who hire full-time, in-person positions?

- There is no minimum FTE status. Organizations can hire virtual staff so long as they are integrated within the primary care team at the practice.

15. What happens if my organization is unable to financially sustain a funded role after the grant period expires?

- HPSM will ask organizations to develop a plan to sustain the position after the grant period as one of the key grant milestones supported by the funding. HPSM encourages grantee organizations to expand their teams in new ways and share their learnings.

16. What role can a behavioral health clinician play on the primary care team?

- A behavioral health clinician can play a crucial role by identifying and addressing patients' mental health needs, providing brief interventions or therapy sessions, and collaborating with the primary care provider to develop comprehensive treatment plans, ultimately improving overall patient well-being and health outcomes.

17. What role can a community health worker play on the primary care team?

- Community health workers (CHW) provide culturally competent health education, care navigation, and resource connection support so that patients can better manage and improve their health. Community health workers assist Primary Care Providers (PCPs) in maximizing their practice by bridging the gap between the healthcare system and the community, enabling PCPs to care for their patients more effectively.

18. What role can a pharmacist or pharmacy technician play on the primary care team?

- A pharmacist helps patients manage medications for chronic conditions, identify potential medication interactions, and provides patient education to improve health outcomes. Pharmacists and pharmacy technicians work collaboratively with primary care providers to improve the quality and safety of patient care.

19. What role can a scribe play on the primary care team?

- Medical scribes assist primary care providers with documentation so that providers can dedicate more time to patient care. Medical scribes can improve provider productivity while reducing the administrative burden on providers.

20. *What role can a nurse play on the primary care team?*

- Nurses work alongside other healthcare providers in a primary care clinic, providing direct patient care, managing chronic conditions, educating patients on health issues and medical conditions, administering medications, coordinating care, and supporting the overall health and wellness of patients within the practice.

Core Stabilization Grant

21. *What is the relationship between HPSM, the grantee organization, and grant recipients at the organization?*

- HPSM contracts with the grantee organization, who contracts with their respective staff (providers and MAs) hired through the incentive. The organization is responsible for distributing grant funds and operationalizing the grant in accordance with grant guidelines. The organization is responsible for recouping funds if the hired staff member leaves the organization before the minimum term is met. Please see the [Core Stabilization Grant page](#) for more information.

22. *Are organizations required to accept the full award amount offered by HPSM?*

- No, organizations do not have to accept the full award offered by HPSM. If HPSM offers to finance a position with a \$50k grant, an organization can choose to accept only \$25k to supplement the compensation package for the role.

23. *Can HPSM provide an example of how organizations have implemented and enforced forgivable loans with staff?*

- Upon request, HPSM can refer grantees to provider organizations that have crafted these agreements.

24. *What are HPSM's requirements for new hires supported by the Core Team Stabilization Grant?*

- Primary Care Providers and Medical assistants must be new to their respective role in the HPSM Medical network, have proper certification and/or licensure, and work in the primary care setting. Positions can be net-new or fill an existing opening on the primary care team. Please see the [Core Stabilization Grant page](#) for more information.

25. *Will HPSM recoup payment from the organization if the terms of the MOU are not met?*

- Each grant award must be confirmed with a Memorandum of Understanding (MOU), which will contain the terms of the agreement, including requirements for repayment. HPSM requires retention of those hired through the funding for three or five years, depending on role type. HPSM will require recoupment of some or all of grant award if the funded role is not retained for the minimum period.

Provider Sabbatical

26. *What is the relationship between HPSM, the grantee organization, and grant recipients at the organization?*

- HPSM contracts with the grantee organization. The grantee organization uses the funding to provide sabbatical time to the rendering provider and coverage during their absence.

27. *Can organizations use sabbatical funding to provide cash bonuses to providers?*

- No, the funding must be used to support a sabbatical for the rendering provider. Sabbatical weeks may be broken up at the organization's discretion.

28. *Can the sabbatical funding be used to cover the lost revenue from the provider taking sabbatical?*

- The funding must be used to provide a paid sabbatical to the provider. HPSM encourages the grantee organization to provide coverage (via locums, etc.) to reduce lost revenue.

29. *How many sabbaticals can a provider take?*

- Rendering providers are only eligible for one sabbatical during the 4-year grant period.

30. *Does the provider have to take the entire duration of the sabbatical at one time?*

- Weeks may be broken up at the organization's discretion. HPSM will require documentation that the entire sabbatical has been taken.

31. *Do primary care providers have to work full time in clinical primary care to be eligible for the provider sabbatical grant?*

- Rendering providers must work full-time at the grantee organization. However, they can have a mix of clinical and non-clinical duties in service of primary care.

Custom Pilot

32. *Our organization has an idea for a custom pilot but is not sure if it is the right fit. Can we reach out to HPSM to discuss it further?*

- Yes, HPSM is committed to working with prospective grantee organizations to define a custom pilot program application. Please feel free to reach out to grants@hpsm.org.

33. *Can custom pilot funding be used to support new technologies?*

- HPSM will consider technology-based grant applications such as software enhancements or utilization of artificial intelligence under Custom Pilot Program Grants. Organizations must demonstrate how the technology will improve primary care team capacity, bandwidth, and/or joy.