



# Minnesota Innovations in Perinatal Health

GRANT REQUEST FOR PROPOSAL (RFP)

## IMPORTANT DATES

March 2, 2026	Request for Proposals (RFP) released
March 13, 2026	Letter of intent due (by 5 p.m. CST)
March 30, 2026	Last day to submit RFP questions
April 3, 2026	Proposals due (by 5 p.m. CST)
June 1, 2026	Estimated start date

For more information and application documents, visit the following webpage: Minnesota Innovations in Perinatal Health

(<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>).

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3/2/2026

To obtain this information in a different format, call: 651-201-3650.

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## Land Acknowledgement

Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment. In Minnesota, we are standing on the ancestral lands of the Dakota people. We want to acknowledge the history of this land, including the Dakota, the Ojibwe, the Ho-Chunk, and the other nations of people who also called this place home. Native peoples were removed unjustly, and we in this space are the beneficiaries of that removal. At MDH, as we understand that land is related to health, we want to be a good steward of the land we are on. This acknowledgement is just one piece of that. We understand the systemic racism, historic trauma, and genocide that has impacted Indigenous communities and peoples in our state.

We recognize that a land acknowledgement is a first step. We support this action with resources and shared decision-making to meet Tribal public health priorities and needs. With our Indigenous neighbors and coworkers, we can advance health equity and work to ensure all communities across the state are thriving and all people have what they need to be healthy.

We encourage state employees and the public to research the history of the lands we are on and if you are able, find Native-led events to attend, organizations to support, and causes to champion.

## Tribal-State Relations Statement

The State of Minnesota is home to 11 federally recognized Indian Tribes with elected Tribal government officials. The State of Minnesota acknowledges and supports the unique political status of Tribal Nations across Minnesota and their absolute right to existence, self-governance, and self-determination. This unique relationship with federally recognized Indian Tribes is cemented by the Constitution of the United States, treaties, statutes, case law, and agreements. The State of Minnesota and Tribal governments across Minnesota significantly benefit from working together, learning from one another, and partnering where possible.

The Minnesota Department of Health recognizes, values, and celebrates the vibrant and unique relationships between the 11 Tribal Nations and the State of Minnesota. Partnerships formed through government-to-government relationships with these Tribes will effectively address health disparities and lead to better health outcomes for all of Minnesota.



## RFP Part 1: Overview

### 1.1 General Information

- **Announcement Title:** Minnesota Innovations in Perinatal Health
- **Minnesota Department of Health (MDH) Program Website:** Minnesota Innovations in Perinatal Health (<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>)
- **Letter of intent (optional) deadline:** March 13, 2026, 5 p.m. CST. Letters of intent are not required, but they are appreciated. Letters of intent should be sent via email to [health.mch@state.mn.us](mailto:health.mch@state.mn.us).
- **Application Deadline:** April 3, 2026, 5 p.m. CST

### 1.2 Program Description

This Request for Proposals (RFP) is focused on improving perinatal health outcomes for communities of color, American Indian communities, and rural communities. This RFP aligns with the [Innovations for Maternal Health Outcomes in Minnesota \(I-MOM\)](#) program, which centers perinatal health innovations within communities most impacted. This RFP will fund innovative activities in community engagement and communications focused on improving perinatal health and focused on supporting the implementation of the [perinatal health strategic plan](#). Grant funds can be either used to support existing programming or used to create new programming.

### 1.3 Funding and Project Dates

#### Funding

The funding source for this RFP is federal funds from the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). Funding will be allocated through a competitive process. If selected, you may only incur eligible expenditures when the grant agreement is fully executed, and the grant has reached its effective date, whichever is later.

Funding	Estimate
Estimated Total Amount to Grant	\$160,000 total for two years; \$80,000 per year
Estimated Number of Awards	4
Estimated Award Maximum	\$40,000 total for two years; \$20,000 per year
Estimated Award Minimum	\$10,000 total for two years, \$5,000 per year

#### Match Requirement

There is no match requirement.

## Project Dates

The estimated grant start date is June 1, 2026. Year 1 is estimated to end on September 29, 2026, and year 2 is from September 30, 2026 – September 29, 2027. This is contingent on satisfactory grantee performance and funding availability.

## 1.4 Eligible Applicants

Eligible applicants include, but are not limited to, faith-based organizations, social service organizations, community nonprofit organizations, Tribal governments, and community clinics. Applicants must have state or federal recognition as a formal organization or entity, such as a Federal Employer Identification Number or 501c3 status. Organizations or groups that do not have state or federal recognition may apply with a fiscal agent. Applicants must be located in and conduct grant activities in the state of Minnesota, but fiscal agents may be located outside of Minnesota. Eligible applicants who wish to work together but have not formed a legal partnership may designate one organization as a fiscal agent. For-profit organizations are *not* eligible to apply.

Grant funds are not transferrable to any other entity. Applicants that are aware of any upcoming mergers, acquisitions, or any other changes in their organization or legal standing, must disclose this information to MDH in their application, or as soon as they are aware of it.

## Collaboration

Multi-organization collaboration is welcomed and encouraged. MDH recognizes that achieving health equity will happen only when we work together. Organizations that collaborate on proposals are encouraged to compensate partners appropriately for their contributions and to consider equity in deciding how resources are distributed among partner organizations.

Depending on the number of collaborating organizations and the scope of their project, multi-organization collaborations may choose to request a higher award amount (toward the top of the estimated award range listed in the table above) than single-organization applicants.

MDH recognizes the sovereignty of Tribal nations. MDH will only fund non-Tribal projects led in Tribal communities if the applicant has full support of the Tribal government. If a non-Tribal applicant proposes to work with a Tribal government or Tribal community, the applicant must be prepared to provide written verification that the Tribal government approves of the project before a grant agreement can be made final. Written verification will be requested at the time an award is offered.

## 1.5 Questions and Answers

All questions regarding this RFP must be submitted by email or phone to [health.mch@state.mn.us](mailto:health.mch@state.mn.us). All answers will be posted every Friday on the Minnesota Innovations in Perinatal Health webpage (<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>).

Please submit questions regarding the content of the RFP no later than 11:59 p.m. Central Standard Time (CST), on March 30, 2026. RFP questions submitted after this date will not be answered. The final questions and answers will be posted to the website on April 1, 2026.

To obtain the questions and answers in a different format, please call: 651-201-3650.

To ensure the proper and fair evaluation of all applications, other communications regarding this RFP including verbal, telephone, written or internet initiated by or on behalf of any applicant to any employee of the Department, other than questions submitted to as outlined above, are prohibited. **Any violation of this prohibition may result in the disqualification of the applicant.**

### **RFP Information Meeting**

There will be one RFP Information Meeting, and one Technical Assistance (TA) session, focused on how to use the RFP application platform, called Foundant, during the application period. Both sessions will be held on Microsoft Teams. All prospective applicants should attend if able. The sessions, along with any questions from that meeting will be recorded and posted on the webpage.

The RFP Information Meeting will occur on:

- Tuesday, March 10, 2026 from noon – 1 p.m. on [Microsoft Teams](#)
  - Meeting ID: 280 231 852 060 59
  - Passcode: QV7vX9QR

The RFP Technical Assistance – How to use Foundant – will occur on:

- Thursday, March 12, 2026 from noon – 1 p.m. on [Microsoft Teams](#)
  - Meeting ID: 216 115 549 310 51
  - Passcode: T3Rs3t8a

## RFP Part 2: Program Details

### 2.1 Priorities

#### Health Equity Priorities

It is the policy of the State of Minnesota to ensure fairness, precision, equity, and consistency in competitive grant awards. This includes implementing diversity and inclusion in grant-making. [The Policy on Rating Criteria for Competitive Grant Review](#) establishes the expectation that grant programs intentionally identify how the grant serves diverse populations, especially populations experiencing inequities and/or disparities.

The goal of these grants funds is to align and strengthen the implementation of innovative, data-driven, community-informed and supported perinatal health programs to improve outcomes for communities experiencing the highest rates of disparities. Refer to [Attachment I](#) for Background Information on Perinatal Health.

This grant will serve:

- Racial and ethnic communities, including American Indians.
- Tribal communities
- LGBTQI communities.
- Disability status.
- Rural communities.
- Geographic diversity within and across Minnesota – including Greater MN, urban/metropolitan areas.

Grant outcomes include but are not limited to:

- Number of strategies that are based on community input and/or planning.
- Number of strategies that address health disparities and inequities experience in the grantee's community.
- Number of participants reached.
- Increase in participants' perinatal health knowledge.
- Increase in partnerships to support grantee organization's mission.
- Increase in staff's capacity to provide culturally specific services.

#### Other Competitive Priorities

##### Culturally grounded programming

Priority will be given to applicants that are rooted in and driven by the community served. Community engagement is a process through which community members are involved in identifying relevant issues, problem-solving and decision-making. Priority will be given to applicants that authentically engage and work in partnership with community members experiencing inequities in perinatal health to ensure activities and strategies are co-created,

appropriate and welcomed by the community. Additionally, priority will be given to projects that are designed to complement and build on other related activities or initiatives in the community. Community engagement and partnership-building should be ongoing throughout the grant period. Please see [Attachment C: Project Narrative](#) and [Attachment F: Application Score Sheet](#) for more information.

## 2.2 Eligible Projects

### Mandatory Project Requirements

#### Target Population

Proposals must focus on promoting racial and/or geographic equity in perinatal health and reducing perinatal health disparities experienced by communities of color, American Indian communities, and/or rural communities.

#### Eligible Activities and Strategies

Innovative activities in community engagement and communications focused on improving perinatal health and supporting the implementation of the Perinatal Health Strategic Plan.

- Estimated total of \$160,000 for two years; \$80,000 per year
- Estimated 4 awards
- Estimated award maximum of \$40,000 for two years; \$20,000 per year
- Estimated award minimum of \$10,000 for two years, \$5,000 per year

This funding is focused on innovative community engagement activities and/or communication activities that improve perinatal health outcomes and support the implementation of the Perinatal Health Strategic Plan. The strategic plan focuses on perinatal health disparities in the Black, American Indian/Indigenous, and rural communities, in addition to highlighting recommendations from ten main topics:

- Education and training requirements
- Diverse workforce
- Accountability
- Health care systems, policies and practices
- Advocacy, policy, and legislation
- Culturally responsive data practices
- Assess to substance use disorder and mental health services
- Funding for substance use disorder and mental health
- Screenings and preventions
- Care for people who are incarcerated

The data listed in [Attachment I](#) are key drivers in the strategic plan. Proposals should incorporate both culturally responsive and data driven strategies.

**Eligible projects may include but are not limited to:**

Community Engagement

- Convene community listening sessions to better understand birthing people's experiences.
- Host a culturally specific peer support group for pregnant and postpartum people.
- Develop partnerships with organizations working towards perinatal health outcomes.

Communications

- Develop culturally specific communications (media services may include formats like online and social media, radio, television, and print) and translations to inform community on the implementation of the Perinatal Health Strategic Plan.
- Create a podcast highlighting birthing people's experiences in pregnancy.
- Implement a social media campaign focused on maternal health lived experiences with near misses and/or maternal death.

**Ineligible Expenses**

Ineligible expenses include but are not limited to:

- Solicitating donations
- Taxes, except sales tax on goods and services
- Lobbyists, political contributions
- Bad debts, late payment fees, finance charges, or contingency funds
- Activities currently funded by other MDH grants, such as family home visiting
- Fundraising
- Expenses not directly related to the approved work plan and not in the approved budget
- Expenses incurred prior to receiving grant agreement
- Any individual piece of equipment that costs more than \$5,000
- Capital improvements or alterations
- Cash assistance paid directly to individuals to meet their personal or family need
- Ongoing medical care or treatment of disease(s) or disability
- Purchase of vehicle(s) for program use
- Land acquisition
- Corporate formation (startup costs)
- Food (meals for meetings, programs, etc.)

## 2.3 Grant Management Responsibilities

### Grant Agreement

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. The grantee is expected to

read the grant agreement, sign, and comply with all conditions of the grant agreement. Grantee should provide a copy of the grant agreement to all grantee staff working on the grant.

No work on grant activities can begin until a fully executed grant agreement is in place.

A sample grant agreement is attached as [Attachment J](#). Applicants should be aware of the terms and conditions of the standard grant agreement in preparing their applications. Much of the language reflected in the sample agreement is required by statute. If an applicant takes exception to any of the terms, conditions or language in the sample grant agreement, the applicant must indicate those exceptions, in writing, in their application in response to this RFP. Certain exceptions may result in an application being disqualified from further review and evaluation. Only those exceptions indicated in an application will be available for discussion or negotiation.

The funded applicant will be legally responsible for assuring implementation of the work plan and compliance with all applicable state requirements including worker's compensation insurance, nondiscrimination, data privacy, budget compliance, and reporting.

### **Accountability and Reporting Requirements**

It is the policy of the State of Minnesota to monitor progress on state grants by requiring grantees to submit written progress reports at least annually until all grant funds have been expended and all the terms in the grant agreement have been met.

All funded applicants will be asked to report the following common measures:

- Geographical area served (counties, zip codes, cities, etc.).
- Number of people served, disaggregated by race/ethnicity, gender, and age (if appropriate).
- Description of the practices implemented by program grantees, lessons learned and emergent best practices for improving perinatal outcomes.

Evaluation is a required component for several reasons:

- It helps grantees know if they are making progress toward their objectives and helps them report back to community partners.
- It helps MDH report to the state legislature, both to justify the use of public funds and to show the difference the funds make in the community.
- It helps document and spread the innovative projects and strategies grantees develop to address health issues in their community based on cultural knowledge and wisdom.

When grantees evaluate their own programs, with MDH assistance, they build their own evaluation capacity for future projects and initiatives. Grantees may use evaluation funds for internal staff time or to subcontract with external evaluation partners. All evaluation expenditures must be documented. Evaluation is expected to include, but is not limited to, developing a logic model and an evaluation plan, developing data collection tools, collecting and analyzing evaluation data and attending any in-state evaluation training and technical

assistance events. Grantees are expected to share evaluation results with MDH and community partners.

The reporting schedule will be:

- Written progress report at the end of year 1
- Final grant summary at the end of the grant period

### **Key Tasks and Deliverables**

- Work with MDH to revise the work plan and budget before the grant start date. This may include incorporating/modifying activities related to the implementation of the Perinatal Health Strategic Plan.
- Create and submit an evaluation plan within two months of the grant start date.
- Assign one staff person to serve as the primary liaison between MDH and the grantee organization.
- Provide regular updates to assigned MDH grant manager. This schedule will be determined after grant agreements are fully executed.
- Provide supporting documents for expenditures listed in the first three invoices submitted for reimbursement for financial reconciliation.
- Participate in a Kick-off and Closing grantee gathering and other grantee meetings as determined by the MDH grant manager.
- Provide grant summary information at the end of the grant period.

### **Grant Monitoring**

Throughout the grant period, MDH will monitor the grantee's progress and performance. Visits may occur virtually or in-person. Minn. Stat. § 16B.97 and Policy on Grant Monitoring require the following:

- One monitoring visit during the grant period on all state grants over \$50,000
- Annual monitoring visits during the grant period on all grants over \$250,000
- Conducting a financial reconciliation of grantee's expenditures at least once during the grant period on grants over \$50,000

According to state policy, the purpose of a monitoring visit (often called a site visit) is to review and ensure progress against the grant's goals, address any problems or issues before the end of the grant period and build rapport between MDH and the grantee. Monitoring visits are an opportunity for MDH to meet grantee staff, learn more about grantee's successes and challenges and see grantee work in action. MDH staff also view these visits as an opportunity to connect grantees with available resources, to learn how they can better support the grantee and provide technical assistance, and to receive feedback from the grantee to help improve the grant program.

The monitoring schedule will be based upon the applicant's risk assessment, which includes consideration of prior performance and previous experience with state grants and will be specified in the grant agreement. At minimum, there will be one monitoring visit and financial reconciliation of one invoice during the grant period.

A financial reconciliation is an in-depth review of all the expenses submitted on a selected invoice. The Grantee will need to submit all supporting documentation that shows how those expenses were calculated. Documentation will include but is not limited to proof of payment on all expenses such as invoices, receipts, bank statements, payroll reports, and purchase orders. This is not an all-inclusive list, and other items may be requested. Grantees will be notified at least 30 days prior to a financial reconciliation to allow sufficient time to gather and submit documentation. Please note that a financial reconciliation is not an audit. <<Include all monitoring requirements for the grant.

## Technical Assistance

MDH will provide technical assistance to grantees to support them in fulfilling their grant objectives. MCH staff will be available to provide guidance and assistance on topics including budgeting, invoicing, data collection, evaluation, and other effective practices.

## Grant Payments

Per [State Policy on Grant Payments](#), reimbursement is the method for making grant payments. All grantee requests for reimbursement must correspond to the approved grant budget. The State shall review each request for reimbursement against the approved grant budget, grant expenditures to-date and the latest grant progress report before approving payment. Grant payments shall not be made on grants with past due progress reports unless MDH has given the grantee a written extension.

The invoicing and payment schedule will be monthly.

## 2.4 Grant Provisions

### Affirmative Action and Non-Discrimination Requirements for all Grantees

The grantee agrees to comply with applicable state and federal laws prohibiting discrimination.

Minnesota's nondiscrimination law is the Minnesota Human Rights Act (MHRA) ([Minn. Stat. § 363A](#); See e.g. Minn. Stat. § 363A.02 (<https://www.revisor.mn.gov/statutes/cite/363A.02>). The MHRA is enforced by the Minnesota Department of Human Rights (<https://mn.gov/mdhr/>). Some, but not all, MHRA requirements are reflected below. All grantees are responsible for knowing and complying with nondiscrimination and other applicable laws.

The grantee agrees not to discriminate against any employee or applicant for employment because of race, color, creed, religion, national origin, sex, marital status, status in regard to public assistance, membership or activity in a local commission, disability, sexual orientation, or age in regard to any position for which the employee or applicant for employment is qualified.

The grantee agrees not to discriminate in public accommodations because of race, color, creed, religion, national origin, sex, gender identity, sexual orientation, and disability.

The grantee agrees not to discriminate in public services because of race, color, creed, religion, national origin, sex, gender identity, marital status, disability, sexual orientation, and status with regard to public assistance.

The grantee agrees to take affirmative steps to employ, advance in employment, upgrade, train, and recruit minority persons, women, and persons with disabilities.

The grantee must not discriminate against any employee or applicant for employment because of physical or mental disability in regard to any position for which the employee or applicant for employment is qualified. The grantee agrees to take affirmative action to employ, advance in employment, and otherwise treat qualified disabled persons without discrimination based upon their physical or mental disability in all employment practices such as the following: employment, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Minn. Rules, part [5000.3550](#).

## Audits

Per [Minn. Stat. § 16B.98](#), subd. 8, the grantee's books, records, documents, and accounting procedures and practices of the grantee or other party that are relevant to the grant or transaction are subject to examination by the granting agency and either the legislative auditor or the state auditor, as appropriate. This requirement will last for a minimum of six years from the grant agreement end date, receipt, and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later.

## Conflicts of Interest

MDH will take steps to prevent individual and organizational conflicts of interest, both in reference to applicants and reviewers per [Minn. Stat. § 16B.98](#) and the Office of Grants Management's Policy 08-01, "Conflict of Interest Policy for State Grant-Making."

**Applicants must complete the Applicant Conflict of Interest Disclosure form ([Attachment G](#)) and submit it as part of the completed application.** Failure to complete and submit this form will result in disqualification from the review process.

Organizational conflicts of interest occur when:

- a grantee or applicant is unable or potentially unable to render impartial assistance or advice
- a grantee or applicant's objectivity in performing the grant work is or might be otherwise impaired
- a grantee or applicant has an unfair competitive advantage

Individual conflicts of interest occur when:

- an applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH's time, services, facilities, equipment, supplies, prestige, or influence
- An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.

- An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

In cases where a conflict of interest is perceived, disclosed, or discovered, the applicants or grantees will be notified and actions may be pursued, including but not limited to disqualification from eligibility for the grant award or termination of the grant agreement.

### **Non-Transferability**

Grant funds are not transferable to any other entity. Applicants that are aware of any upcoming mergers, acquisitions, or any other changes in their organization or legal standing, must disclose this information to MDH in their application, or as soon as they are aware of it.

### **Public Data and Trade Secret Materials**

All applications submitted in response to this RFP will become property of the State. In accordance with [Minn. Stat. § 13.599](#), all applications and their contents are private or nonpublic until the applications are opened.

Once the applications are opened, the name and address of each applicant and the amount requested is public. All other data in an application is private or nonpublic data until completion of the evaluation process, which is defined by statute as when MDH has completed negotiating the grant agreement with the selected applicant.

After MDH has completed the evaluation process, all remaining data in the applications is public with the exception of trade secret data as defined and classified in [Minn. Stat. § 13.37](#), subd. 1(b). A statement by an applicant that the application is copyrighted or otherwise protected does not prevent public access to the application or its contents. ([Minn. Stat. § 13.599](#), subd. 3(a)).

If an applicant submits any information in an application that it believes to be trade secret information, as defined by [Minn. Stat. § 13.37](#), the applicant must:

- Clearly mark all trade secret materials in its application at the time it is submitted,
- Include a statement attached to its application justifying the trade secret designation for each item, and
- Defend any action seeking release of the materials it believes to be trade secret, and indemnify and hold harmless MDH and the State of Minnesota, its agents and employees, from any judgments or damages awarded against the State in favor of the party requesting the materials, and any and all costs connected with that defense.
- This indemnification survives MDH's award of a grant agreement. In submitting an application in response to this RFP, the applicant agrees that this indemnification survives as long as the trade secret materials are in possession of MDH. The State will not consider the prices submitted by the responder to be proprietary or trade secret materials.

MDH reserves the right to reject a claim that any particular information in an application is trade secret information if it determines the applicant has not met the burden of establishing that the information constitutes a trade secret. MDH will not consider the budgets submitted

by applicants to be proprietary or trade secret materials. Use of generic trade secret language encompassing substantial portions of the application or simple assertions of trade secret without substantial explanation of the basis for that designation will be insufficient to warrant a trade secret designation.

If a grant is awarded to an applicant, MDH may use or disclose the trade secret data to the extent provided by law. Any decision by the State to disclose information determined to be trade secret information will be made consistent with the Minnesota Government Data Practices Act ([Ch. 13 MN Statutes](#)) and other relevant laws and regulations.

If certain information is found to constitute trade secret information, the remainder of the application will become public; in the event a data request is received for application information, only the trade secret data will be removed and remain nonpublic.

## 2.5 Review and Selection Process

### Review Process

Funding will be allocated through a competitive process with review by a committee representing MDH, local public health agencies, and community-based organizations with relevant content expertise as well as community members with lived experiences relevant to the subject matter. The review committee will evaluate all eligible and complete applications received by the deadline.

MDH will review all committee recommendations and is responsible for award decisions. **The award decisions of MDH are final and not subject to appeal.** Additionally:

- MDH reserves the right to withhold the distribution of funds in cases where proposals submitted do not meet the necessary criteria.
- The RFP does not obligate MDH to award a grant agreement or complete the project, and MDH reserves the right to cancel this RFP if it is considered to be in its best interest.
- MDH reserves the right to waive minor irregularities or request additional information to further clarify or validate information submitted in the application, provided the application, as submitted, substantially complies with the requirements of this RFP. There is, however, no guarantee MDH will look for information or clarification outside of the submitted written application. Therefore, it is important that all applicants ensure that all sections of their application are complete to avoid the possibility of failing an evaluation phase or having their score reduced for lack of information.

### Selection Criteria and Weight

Review committee members will be divided into teams so that multiple individuals will score each application. Each reviewer will review and score the applications assigned to their team individually, using the score sheet provided (refer to [Attachment F](#) for a sample score sheet). The review committee will be reviewing each applicant on a 100-point scale. A standardized scoring system will be used to determine the extent to which the applicant meets the selection criteria.

The scoring factors and weight that applications will be judged are listed in [Attachment F: Application score sheet](#). MDH strongly encourages applicants to use the score sheet as they are creating their application.

Review teams will participate in a review meeting where applications are discussed as a team. Reviewers will be able to modify their individual scores based on discussions at the review meeting. At the end of the meeting, team members will make recommendations to MDH based on the scoring criteria and discussion.

MDH will make final decisions on all applications and will balance the recommendations by the review teams with other factors including, but not limited to:

- Review team scores
- Representativeness of the populations served by applicants
- Activities focused on community engagement and collaboration
- Culturally grounded programming
- Geographic distribution of services
- Total funding available

### **Grantee Past Performance and Due Diligence Review Process**

- It is the policy of the State of Minnesota to consider a grant applicant's past performance before awarding subsequent grants to them.
- State policy requires states to conduct a pre-award risk assessment prior to a grant award. Additional information may be required for proposed budgets of \$50,000 and higher to a potential applicant in order to comply with [Policy on Preaward Risk Assessment](#).

### **Notification**

MDH anticipates notifying all applicants of funding decisions by emailing award letters in early May of 2026. Awarded applicants who are not current vendors in the State's SWIFT system will need to become vendors before a grant agreement can be made final. Instructions on how to become a vendor will be sent to awarded applicants when they are notified of the award. There may be negotiations to finalize a grantee's work plan and/or budget before a grant agreement can be made final ("executed"). Once a work plan and/or budget have been agreed upon, a grant agreement can then be executed with the applicant agency being awarded the funds. The grant agreement will be in effect until **September 29, 2027**, contingent on satisfactory grantee performance and funding availability.

## RFP Part 3: Application and Submission Instructions

### LETTER OF INTENT

Applicants are strongly encouraged to submit a non-binding letter of intent by March 13, 2026, by 5 p.m. CST. While prospective applicants are strongly encouraged to submit a letter of intent, it is not a mandatory requirement of this RFP. This means that an application may still be considered even if the applicant did not submit a letter of intent; likewise, an applicant is not obligated to submit an application just because they submitted a letter of intent.

Letters of Intent should include:

- Applicant legal name
- Proposed communities and/or priority populations to be served.
- Proposed geographic area to be served.
- Anticipated strategy to be funded through this RFP.
- Anticipated amount of funding the applicant will request.

Letters of Intent must be submitted via email by 5 p.m. (CST) on March 13, 2026, to [health.mch@state.mn.us](mailto:health.mch@state.mn.us). If you do not receive a confirmation within two days of submission, please contact the MCH section line at 651-201-3650.

### 3.1 Application Deadline

**All applications must be received by MDH no later than 5 p.m. Central Time, on April 3, 2026 to the grant interface portal, Foundant ([Foundant \(https://www.grantinterface.com/Home/Logon?urlkey=mdcfh\)](https://www.grantinterface.com/Home/Logon?urlkey=mdcfh)).**

**Late applications will not be accepted.** It is the applicant's sole responsibility to allow sufficient time to address all potential delays caused by any reason whatsoever. MDH will not be responsible for delays caused by computer, or technology problems.

**Acknowledgement of application receipt.** MDH will "reply all" through the grant interface portal to the email address that submitted the application to acknowledge receipt of your application within two business days of the receipt of an application. If you do not receive an acknowledgment email within that time frame from when you submitted the application, it means MDH did not receive your application/documents. Please contact the MCH section via email at [health.mch@state.mn.us](mailto:health.mch@state.mn.us), if you submitted your application through Foundant but did not receive an email confirmation within two business days.

### 3.2 Application Submission Instructions

Applications must be submitted electronically by **5 p.m. (CST) on April 3, 2026** to the grant interface portal, [Foundant \(https://www.grantinterface.com/Home/Logon?urlkey=mdcfh\)](https://www.grantinterface.com/Home/Logon?urlkey=mdcfh). Late applications will not be accepted. It is the applicant's sole responsibility to allow sufficient time to address all potential delays caused by computer or technology problems. **MDH is not**

responsible for any computer or technology issues that may arise in the receipt of applications.

### 3.3 Application Instructions

MDH requires application submissions to be made through the grant interface portal, [Foundant \(https://www.grantinterface.com/Home/Logon?urlkey=mdcfh\)](https://www.grantinterface.com/Home/Logon?urlkey=mdcfh).

- **New Users:** Please click on “Create New Account” to complete the registration process and create your logon credentials.
- **Existing Users:** Please enter your credentials and log in. If you forgot your password, use the “Forgot your Password?” link to the left on the logon screen to reset your password.
- **Not Sure:** If you think that you or someone at your organization has already registered in Foundant, do not create a new account. Please contact our MDH Maternal and Child Health staff at [health.MCH@state.mn.us](mailto:health.MCH@state.mn.us) for assistance.
- Once in the system, click on the “apply” button located on the upper tool bar on the home page. You will be redirected to a list of open applications in the system. Please select the option that reads: *Minnesota Innovations in Perinatal Health (June 2026-September 2027) application*.

You must submit the following in order for the application to be considered complete (also listed in Attachment A: Application Checklist):

- Letter of Intent (optional) due by 5 p.m. (CST) on March 13, 2026. Letters of intent should be sent via email to [health.mch@state.mn.us](mailto:health.mch@state.mn.us).
- SWIFT vendor account: All applicants must have a SWIFT vendor account. Please go to SWIFT, login and confirm that your organization’s name, address, locations, banking information, phone numbers, and other contact information is correct. MDH strongly encourages applicants to initiate direct deposit. To access SWIFT: [SWIFT Vendor Resources \(https://mn.gov/mmb/accounting/swift/vendor-resources/\)](https://mn.gov/mmb/accounting/swift/vendor-resources/)
- Attachment B: Grant Applicant Cover Sheet
- [Attachment C: Project Narrative](#)
- [Attachment D: Workplan Template](#)
- [Attachment E: Budget Details and Justification](#)
- [Attachment F: Application Score Sheet](#)
- [Attachment G: Conflict of Interest- Applicant](#)
- [Attachment H: Due Diligence Form](#)
- Application due by 5 p.m. (CST) on April 3, 2026. Submit via Foundant. The application must be limited to Word, Excel and/or PDF files.

Applications must include all required application materials, including attachments. Do not provide any materials that are not requested in this RFP, as such materials will not be considered nor evaluated. **MDH reserves the right to reject any application that does not meet these requirements.**

By submitting an application, each applicant warrants that the information provided is true, correct, and reliable for purposes of evaluation for potential grant award. The submission of inaccurate or misleading information may be grounds for disqualification from the award, as well as subject the applicant to suspension or debarment proceedings and other remedies available by law.

**All costs incurred in responding to this RFP will be borne by the applicant.**

**If you do not receive a confirmation within two days of submission, please contact the MCH section via email at [health.mch@state.mn.us](mailto:health.mch@state.mn.us), or at the MCH section line at 651-201-3650.**

## 3.4 Application Forms

### 1. Grant Applicant Cover Sheet (online entry; not scored)

Applicants shall complete and submit Attachment B: Grant Applicant Face Sheet as part of their application. Basic information about the applicant entity is requested, including legal and business name (as entered in SWIFT), address, and tax identification. All applicants must identify the Authorized Organization Representative (AOR). This person is often the CEO of the organization and must have the authority to enter into a legally binding contract with the State. This information will be used for contracting purposes.

### 2. Project Narrative (online entry; scored)

Applicants shall complete and submit [Attachment C: Project Narrative](#) as part of their application. The project narrative describes community needs, gaps in services, and community-driven approaches to improve perinatal health outcomes experienced by communities.

### 3. Workplan (Excel Workbook/upload; scored)

Applicants shall complete and submit [Attachment D: Workplan template](#) as part of their application. A template will be provided. Applicants can edit the workplan to adapt objectives and activities to meet the needs of their priority population, and if awarded, should submit a final workplan similar in scope. Activities may be added or adapted but not deleted. The work plan timeline must extend across the entire grant period (June 2026 – September 2027). The workplan must also include start and completion dates for all activities.

The [workplan template](#) is available within the RFP and can be found on the webpage: Minnesota Innovations in Perinatal Health (<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>).

### Budget Details and Justification (Excel Workbook/upload; scored)

Applicants shall complete and submit [Attachment E: Budget Details and Justification](#) as part of their application. A budget template will be provided. The file must be submitted as an Excel Workbook; a PDF will not be reviewed.

The [budget template](#) is available with the RFP and can be found on the webpage: Minnesota Innovations in Perinatal Health (<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>). The

budget template includes two sheets, one for year 1 expenses and one for year 2 expenses. Please fill out both worksheets. Year 1 is estimated to be from June 1, 2026 – September 29, 2026. Year 2 is from September 30, 2026 – September 29, 2027.

**4. Supplemental Documents (not scored)**

Applicants must submit the following supporting documents to be eligible for review:

- [Application Score Sheet \(Attachment F\)](#)
- [Applicant Conflict of Interest Form \(Attachment G\)](#)
- [Due Diligence Form \(Attachment H\)](#)
- [Sample Grant Agreement \(Attachment J\)](#)

## RFP Part 4: Attachments

- Attachment A: Application Checklist
- Attachment B: Grant Applicant Cover Sheet
- [Attachment C: Project Narrative](#)
- [Attachment D: Work Plan Template](#)
- [Attachment E: Budget Details and Justification](#)
- [Attachment F: Application Score Sheet](#)
- [Attachment G: Conflict of Interest Form](#)
- [Attachment H: Due Diligence Form](#)
  - Community Health Boards and Tribal Nations do not need to submit this form as part of their application.
- [Attachment I: Background Information on Perinatal Health](#)
- [Attachment J: Sample Grant Agreement](#)

## Attachment A: Application Checklist

- Letter of Intent (**optional**) due by **5 p.m. (CST) on March 13, 2026**. Submit via email, [health.mch@state.mn.us](mailto:health.mch@state.mn.us).
- SWIFT vendor account: All applicants must have a SWIFT vendor account. Please go to SWIFT, login and confirm that your organization's name, address, locations, banking information, phone numbers, and other contact information is correct. MDH strongly encourages applicants to initiate direct deposit. To access SWIFT: [SWIFT Vendor Resources \(https://mn.gov/mmb/accounting/swift/vendor-resources/\)](https://mn.gov/mmb/accounting/swift/vendor-resources/)
- Attachment B: Grant Applicant Cover Sheet
- [Attachment C: Project Narrative](#)
- [Attachment D: Workplan](#)
- [Attachment E: Budget Details and Justification](#)
- [Attachment F: Application Score Sheet](#)
- [Attachment G: Conflict of Interest- Applicant](#)
- [Attachment H: Due Diligence Form](#)
- Application due by **5 p.m. (CST) on April 3, 2026**. Submit via Foundant. The application must be limited to Word, Excel and/or PDF files.

## Attachment B: Grant Applicant Cover Sheet

The following information must be entered into Foundant. By submitting the following information, respondent acknowledges the following:

*I certify that the information contained above is true and accurate to the best of my knowledge; that I have informed this agency's governing board of the agency's intent to apply for this grant; and, that I have received approval from the governing board to submit this application on behalf of the agency.*

### General Applicant Information

- Applicant's Legal Name (do not use a "doing business as" name):
- *This should be the same name used when a federal tax identification number was obtained.*
- Applicant's Business Address (street, city, state, zip):
- Applicant's Minnesota Tax Identification Number:
- Applicant's Federal Tax Identification Number:
- SWIFT Vendor ID number (if you have one):

### Director of Applicant Agency

- Name:
- Business Address (street, city, state, zip):
- Phone Number:
- Email:

### Financial Contact, or Fiscal Agent, for this grant (if applicable)

- Name of Financial Contact for this grant:
- Name of Fiscal Agent for this grant, if applicable:
- Phone Number:
- Email:

### Contact Person for the grant

- Name:
- Business Address (street, city, state, zip):
- Phone Number:
- Email:

### Requested Funding

Total Amount for both years on Proposed Budget: \$

### State of MN Funding Experience

Please list any previous and/or current experience working with the State of Minnesota, including agency name, activities completed, length of time, and amount of money awarded.

**Communities Served**

Select the communities you intend to serve through this grant application (select all that apply):

- African American
- African immigrant
- American Indian
- Asian/Pacific Islander
- Hispanic/Latino/Latina/Latine
- LGBTQIA+ communities
- People living with disabilities
- Faith-based communities
- Rural communities
- Other – please describe below
- Description of ‘other’ community served (optional)

Geographic area(s) served (select all that apply):

- Central Minnesota
- Northeast Minnesota
- Northwest Minnesota
- Southeast Minnesota
- Southwest Minnesota
- Twin Cities metropolitan area
- Other- please describe below
- Description of “other” geographic area served (optional):

## Attachment C: Project Narrative

### Section I - Proposal Summary

1. Provide a summary of your proposal. This should include communities engaged, key activities or strategies, and anticipated outcomes. (2,000-character limit, including spaces).

### Section II - Organizational Capacity

2. Describe the staff who will be involved in the proposed projects, including training, expertise, and capacity to deliver the activities. Explain how staff are qualified to work with the community/communities to be served, for instance having staff that reflect the community (2,000-character limit, including spaces).

### Section III – Project Goals

3. Summarize the overall goals and objectives of the proposed project (2,000-character limit, including spaces).
4. Describe how the proposed strategies and implementation activities are evidence-based and/or using promising practices (2,000-character limit, including spaces).

### Section IV – Culturally grounded programming

5. Describe the organization's relevant experience working with the community/communities served, addressing health disparities, and conducting activities related to the proposed project (3,000-character limit, including spaces).
6. Explain how the proposed project will address perinatal health disparities in the target community/communities (3,000-character limit, including spaces).
7. Describe any gaps in services and/or resources that the project will fulfill to improve perinatal health outcomes experienced by communities. Include information about how activities reflect community priorities and cultural considerations (3,000-character limit, including spaces).
8. Explain how your project will engage and/or share power and decision-making with communities of color, American Indians, disability communities, rural communities, and/or LGBTQ communities. (3,000-character limit, including spaces).

### Section V – Evaluation

9. Briefly explain how grant activities will be monitored/evaluated during the grant period (2,000-character limit, including spaces).

## Attachment D: Work Plan Template

The work plan template is available as a separate word document [Appendix D: Work Plan Template](https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html), found on the grant webpage: Minnesota Innovations in Perinatal Health (<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>).

Please complete your work plan on this document and submit it as part of your application. Please note that the workplan timeline is for the entire grant period (June 2026 – September 2027).

The workplan should include the following:

- Description of each activity
- Timeline for each activity
- Key staff and partners involved for each activity
- Estimated number of people to be reached through each activity

## Attachment E: Budget Details and Justification

### Introduction

You will need to account for all your grant program costs under six different line items. The following paragraphs provide detailed information on what costs can go into those six lines. You will be required to show detailed calculations to support your costs. Failure to include the required detail could result in a delayed grant agreement if your application is selected for funding.

All costs under this grant must be prorated to reflect fair share of the expense to this program. For example, if a computer is purchased for one staff person who works 0.5 FTE on this grant and 0.5 FTE on another program, the cost for that computer should be split 50 – 50 by this grant and the other program.

If the grant agreement(s) are not fully executed in a timely manner, the award funded may be pro-rated to reflect the actual time frame the grant is in effect.

It is strongly suggested that applicants incorporate into their budgets the costs of appropriate financial staff to provide financial oversight to the grant. This could be through contracting with an individual or organization or a direct hire.

The budget narratives should provide a brief but sufficient explanation of how funds are proposed over grant period.

**Applicants are strongly encouraged to use the Microsoft Excel template provided on the grant webpage: Minnesota Innovations in Perinatal Health (<https://www.health.state.mn.us/people/womeninfants/womenshealth/perihealth.html>).**

The Budget Template and Justification is a scored section for a total of 10 out of 100 points

### Salary and Fringe:

Grant funds can be used for salary and fringe benefits for staff members directly involved in applicant's proposed activities. For each proposed funded position, please list:

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- Title.
- Full time equivalent (FTE) on this grant (see example below).
- Expected rate of pay.
- Total amount applicant expects to pay the position for the year.

Any salaries from administrative support, accounting, human resources, or IT support, **MUST** be supported by some type of time tracking to be included in the Salary and Fringe line. Salary and fringe expenses not supported by time reporting documentation may be included in the indirect line if these unsupported salaries and fringe are approved by MDH. Any salary and fringe expenses not approved by MDH are unallowable and may not be charged to this grant.

**Full-time equivalent (FTE):** The percentage of time a person will work on this grant project. Each position that will work on this grant should show the following information:

**EXAMPLE:**

Public Health Nurse: \$30.40/hourly rate  
x 2,080/annual hours (or whatever your agency annual standard is)  
\$63,232 annual salary

Multiply annual salary by your agency's fringe rate:

\$63,232 annual salary  
x 23% fringe rate (use your agency fringe rate, 23% is just an example)  
\$14,543 fringe amount

Provide the breakdown of what your fringe rate includes: 6.20% FICA

1.45% Medicare  
3.00% Retirement  
12.35% Insurance 23.00% Total Fringe Rate

Now add the annual salary and the fringe amount together:

\$63,232 annual salary  
+ \$14,543 fringe  
\$77,775/annual salary and fringe total

Multiply the annual salary and fringe total by the FTE being charged to this grant:

\$77,775 annual salary and fringe total  
x .50 FTE assigned to grant  
\$38,888 total to be charged to grant for this position.

**Contractual Services**

Applicants must identify any subcontracts that will occur as part of carrying out the duties of this grant program as part of the Contractual Services budget line item in the proposed budget. The use of contractual services is subject to State review and may change based on final work plan and budget negotiations with selected grantees. Applicants will be responsible for monitoring any subcontractors to ensure they are following all State, Federal, and programmatic regulations including proper accounting methods.

Applicant responses must include:

- Description of services to be contracted.
- Anticipated contractor/consultant's name (if known) or selection process to be used.
- Length of time the services will be provided.
- Total amount to be paid to the contractor.

### Travel

List the expected travel costs for staff working on the grant, including mileage, parking, hotel, and meals. List any minimum travel requirements of the grant such as attending a statewide trainings/conference, etc. If none, delete these instructions. If project staff will travel during the course of their jobs or for attendance at educational events, itemize the costs, frequency, and the nature of the travel. Grant funds cannot be used for out-of-state travel without prior written approval from MDH. Minnesota will be considered the home state for determining whether travel is out of state.

#### **Non-tribal applicants:**

Budget for travel costs (mileage, lodging, and meals) using the rates listed in the State of Minnesota Commissioner's Plan (<https://mn.gov/mmb-stat/000/az/labor-relations/unrepresented-plan/unrepresented-plan.pdf>).

Hotel and motel expenses should be reasonable and consistent with the facilities available. Grantees are expected to exercise good judgement when incurring lodging expenses.

Mileage will be reimbursed at the current IRS rate at the time of travel.

#### **Tribal Nation applicants:**

Budget for travel costs (mileage, lodging, and meals) using the rates provided by the [General Services Administration \(GSA\)](https://www.gsa.gov/travel/plan-book/per-diem-rates/per-diem-rates-results?action=perdiems_report&fiscal_year=2026&state=MN&city=&zip=) ([https://www.gsa.gov/travel/plan-book/per-diem-rates/per-diem-rates-results?action=perdiems\\_report&fiscal\\_year=2026&state=MN&city=&zip=](https://www.gsa.gov/travel/plan-book/per-diem-rates/per-diem-rates-results?action=perdiems_report&fiscal_year=2026&state=MN&city=&zip=)). Current lodging amounts and meal reimbursement rates vary depending on where the travel occurs in Minnesota.

Consult the breakdown of the [General Services Administration \(GSA\) Meals and Incidental Expense Rates](https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown) (<https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown>) for current rates for Tribal Nations.

Mileage will be reimbursed at the current IRS rate at the time of travel.

## Supplies and Expenses

Briefly explain the expected costs for items and services the applicant will purchase to run the program. These might include additional telephone equipment; postage; printing; photocopying; office supplies; training materials; and equipment. Include the costs expected to be incurred to ensure that community representatives, partners, or clients who are included in the applicant's process or program can participate fully. Examples of these costs are fees paid to translators or interpreters. Grant funds may not be used to purchase any individual piece of equipment that costs more than \$10,000, or for major capital improvements to property.

## Other

Include in this section any expenses the applicant expects to have for other items that do not fit in any other category. Some examples include but are not limited to: staff training and incentives. Grant funds cannot be used for capital purchases, permanent improvements; cash assistance paid directly to individuals; or any cost not directly related to the grant. Expenses in the "Other" line should represent the appropriate fair share to the grant.

## Indirect Costs

Indirect costs are expenses of doing business that cannot be directly attributed to a specific grant program or budget line item. These costs are often allocated across an entire agency and may include administrative, executive and/or supervisory salaries and fringe, rent, facilities maintenance, insurance premiums, etc.

The following are examples that could be included in indirect costs:

- Your department pays a general percentage to the city/county attorney's office or the sheriff's department and these costs cannot be specifically attributed to an individual grant.
- Your CHB or department pays a fee or percentage to the county/city human resources department and these costs are not tied to a specific grant.
- The CHBs accounting system does not allow community health services (CHS) administrator's time to be directly attributed to specific grant activities.

In contrast, administrative costs are expenses not directly related to delivering grant objectives, but necessary to support a particular grant program. These are items that while general expenses, can be attributed and appropriately tracked to specific awards. These items should be included in the grantee budget as direct expenses in the appropriate lines of Salaries and Fringe, Supplies, Contractual Services, or Other. They **should not** be included in the Indirect line.

The following are examples of administrative costs that should be included in direct lines of the budget and/or invoice:

- The CHS administrator's time that can be tracked through time studies to a specific grant (include in the Salary/Fringe line).

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- A portion of secretarial/administrative support, accounting, human resources or IT support staff expenses that can be tracked through time studies to a specific grant (include in the Salary/Fringe line).
- Printing and supplies that your accounting system is able to track (for example through copy codes) to a specific grant (include in the Supply line).

Any salary costs included in the Salary and Fringe line of the budget and/or invoice must be supported by proper time documentation. The total allowed for indirect costs can be charged up to your federally approved indirect rate, or up to a maximum of 15%.

If the applicant will be using a Federally Negotiated Indirect Cost Rate, you will need to submit with your application your most current federally approved indirect rate.

## Attachment F: Application Score Sheet

A numerical scoring system will be used to evaluate eligible applications. Scores will be used to develop final recommendations.

Applicants are encouraged to score their own application using the evaluation scoresheet before submitting their application. This step is not required but may help ensure applications address the criteria evaluators will use to score applications.

### Rating Levels

Rating or Score	Description
Excellent <b>or 5</b>	Outstanding level of quality; significantly exceeds all aspects of the minimum requirements; no significant weaknesses.
Very Good <b>or 4</b>	Substantial response; meets in all aspects and in some cases exceeds, the minimum requirements; no significant weaknesses.
Good <b>or 3</b>	Generally meets minimum requirements; significant weaknesses, but correctable.
Marginal <b>or 2</b>	Lack of essential information; low probability for success; significant weaknesses, but correctable.
Unsatisfactory <b>or 1</b>	Fails to meet minimum requirements; needs major revision to make it acceptable.

### Scoring Selection – Scored up to 100 points

Proposal Components	Possible Points
Attachment C: Section I - Proposal Summary	5
Attachment C: Section II - Organizational Capacity	10
Attachment C: Section III – Project Goals	10
Attachment C: Section IV – Culturally Grounded Programming	40
Attachment C: Section V - Evaluation	5
Attachment D: Work Plan	20

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Attachment E: Budget	10
Total	100 points

**Scoring Sections**

Attachment C: SECTION I. PROPOSAL SUMMARY (5 POINTS)

Criteria			Score (1-5)
1. The proposal summary is clear and concise and includes communities engaged, key activities or strategies, and anticipated outcomes.			
Possible Points	Points Awarded	Multiplier	Total Points
5		x1.0	

Attachment C: SECTION II. ORGANIZATIONAL CAPACITY (10 POINTS)

Criteria			Score (1-5)
2. The applicant describes the staff who will be involved in the proposed projects, including training, expertise, and capacity to deliver the activities.			
3. The applicant describes how staff are qualified to work with the community/communities to be served.			
Possible Points	Points Awarded	Multiplier	Total Points
10		x1.0	

Attachment C: SECTION III. Project Goals (10 POINTS)

Criteria			Score (1-5)
4. The project goals and objectives are clear, measurable, feasible and appropriate for the target population(s).			

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5. The applicant clearly describes how the proposed strategies and implementation activities are evidence-based and/or use promising practices.			
Possible Points	Points Awarded	Multiplier	Total Points
10		x1.0	

Attachment C: SECTION IV. CULTURALLY GROUNDED PROGRAMMING (40 POINTS)

*This section has the highest number of points because it is a priority for this grant (refer to competitive priorities listed in the RFP). MDH staff will multiply the total score for this section by 2, with a maximum of 40 points.*

Criteria	Score (1-5)		
6. The applicant describes the organization’s relevant experience working with the community/communities served, addressing health disparities, and conducting activities related to the proposed project.			
7. The applicant clearly explains how their project will address perinatal health disparities in the target community/communities.			
8. The applicant clearly identifies how their project will fulfill a gap in services and/or resources in the target community, and how these activities reflect community priorities, and cultural considerations.			
9. The applicant clearly explains how their project will engage and/or share power and decision-making with communities of color, American Indians, disability communities, rural communities, and/or LGBTQ+ communities.			
Possible Points	Points Awarded	Multiplier	Total Points
40		x2.0	

Attachment C: SECTION V. EVALUATION (5 POINTS)

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Criteria			Score (1-5)
10. The application clearly describes how grant activities will be evaluated during the grant period.			
Possible Points	Points Awarded	Multiplier	Total Points
5		x1.0	

Attachment D: WORK PLAN (20 POINTS)

Criteria			Score (1-5)
11. The work plan provides a clear picture of the scope and timeline of the proposed project (both year 1 and year 2 activities are described in the work plan).			
12. The activities are clear and comprehensive and will achieve the identified objectives and strategies.			
13. The work plan outlines each activity that includes the staff involved; external partners involved; expected timeline; and estimate outputs.			
14. The work plan project goals and objectives are tangible, measurable, and achievable and are connected to the project narrative. Objectives address the key activities and strategies in a feasible timeframe.			
Possible Points	Points Awarded	Multiplier	Total Points
20		x1.0	

Attachment E: BUDGET (10 POINTS)

Criteria			Score (1-5)
15. The requested level of funding is reasonable and justified for the proposed scope of activities.			

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<p>16. The budget narrative includes a clear and reasonable description of how funds will be used. The expenditures in the budget narrative support activities outlined in the work plan, including meeting grant requirements, supporting community partners and evaluating the project activities and outcomes.</p>			
Possible Points	Points Awarded	Multiplier	Total Points
10		x1.0	

## Attachment G: Conflict of Interest Form

- Refer to [Applicant Conflict of Interest Disclosure Form](#)

## Attachment H: Due Diligence Form

- Refer to [Due diligence form](#)

## Attachment I: Background Information on Perinatal Health

Refer to [pdf link](#) for background information on perinatal health.

## Attachment J: Sample Grant Agreement

Refer to [pdf link](#) for an example of what the grant agreement will look like, if selected.