

BID Milton Request for Proposals Q and A

March 13, 2026, via Zoom

Community-based Health Initiative (CHI) Process Overview

CHI process is guided by BID Milton's Hospital Community Benefits Advisory Committee (CBAC). The CBAC selected the health priority areas of focus and an allocation committee will determine the grant recipients.

RFP details include:

- Funding available: \$2,263,935.82 over three years to address upstream social determinants of health
 - Housing: one (1) 3-year grant for a total of \$1,584,755.07
 - Equitable Access to Care: up to two (2) 3-year grants for a total of \$679,180.75
- Priority Areas: Housing and Equitable Access to Care
- Priority Community: Quincy
- Organizations to be funded: Up to 2 for Access to Care and 1 for Housing
- Important dates: April 13, 2026: Submission date; Applicants notified end of May; July 1st: grant term begins

Questions

Can an organization submit multiple applications?

No, organizations can submit a maximum of one application as a lead organization. An organization can be listed as a partner in multiple applications, though organizations should consider their capacity to complete their responsibilities as partners should multiple projects receive funding.

Are non-profits with a fiscal agent eligible to apply?

Non-profit organizations with a fiscal agent (also known as a fiscal sponsor or fiduciary) are eligible to apply for funding

Is this a one-time only award?

Yes, this is a one-time only award. Funding will be distributed over three years.

In the evaluation section of the application, can an organization only indicate that they will work with the BID Milton evaluator or is evaluation detail expected?

While there will be a formal evaluation planning phase, it is expected that the organization will provide details related to the anticipated impact and data collection process. This section should not be left blank.

When do the funds need to be expended?

It is expected that funds will be used within 12 months of the last payment date.

Will all grantees be awarded the same amount of funds?

No, grant allotment can vary. Allotment per grantee could be different per number of grant awards.

Can an agency be a lead on one priority area and a funded partner on another priority area?

Yes.

The RFP says up to 2 organizations will be funded for equitable access to care, can you elaborate?

This will depend on amount of applications received and the allocation committee's scoring. We encourage all to apply for the max level of funding. The allocation committee could come back with a different level of funding.

How does it work if a coalition wants to apply for one of the grants?

The lead applicant would be the fiscal agent for the partnership.

Why is having collaborating partners scored as a priority?

The Department of Public Health likes to see the collaboration piece as it helps to address social determinants of health and sustainability.

Will this funding be based on a reimbursement model?

No, there will be an invoice required for payment and the payment schedule will be outlined in the contract.

How is "youth" defined?

Centers for Disease Control and Prevention's definition of youth is 0-24.

What types of upstream interventions or strategies are you hoping to see in proposals?

This depends on the organization and the opportunity to improve access to care; different initiatives will vary. They must include addressing social determinants of health, addressing root causes, and having a plan to sustain impact. Examples are provided in the RFP.

Are reporting requirements standardized or adaptable based on project size and organizational capacity?

Some standardized metrics will be required to streamline and assess overall impact, but organizations will be able to implement metrics specific to their project.

Will grantees receive support with data collection, evaluation, or measurement?

Yes, there will be an evaluator paid by BILH, but grantees will be responsible for collecting data on their own as well. Grantees should plan to budget 10% for staffing/tools separately to support this. Grantees will have assistance from the outside evaluator to develop SMART Goals, logic models, etc.

Is there a match?

No, but this would help with the application in terms of strength and sustainability. You're welcome to add in.

Can you elaborate on the three-month planning period? Three years after that, is the grant? The first three months (July – September) will be working with the external evaluator. Group sessions and one-on-one sessions. Other pre-planning can occur during this time such as hiring for a position.

Is there any allowance for marketing expenses in the budget?

This can be considered an indirect cost.

I see that direct clinical service delivery is not allowed. I'm curious about case manager roles that support rapid rehousing and stabilization — connecting clients to housing and/or services and providing ongoing wraparound support. Is this allowed?

Case managers, social workers and/or navigators that assist clients by connecting them to wrap around services such as workforce development, education opportunities and behavioral health services are allowed. The applicant is encouraged to identify and share how these services address the root social, economic, and structural conditions. Projects that address upstream approaches will be scored more favorably by the allocation committee.

Is direct assistance an allowable expense? For example, flexible funds for clients to help with moving costs (first, last, security), rental or utilities arrears, storage facility rental, etc.?

No, direct assistance is not an allowable expense.

Can these funds be used to support a capital project to build affordable units of housing?

Funds can be used to provide "gap" funding or to complete a "housing stack".