

Rural Stimulus Grant Program Reviewer Scoring Workbook DRAFT

Scoring Guide

This is a draft workbook that will be provided for reviewer's comparative analysis of applications.

SCORING

Scoring items are based on the information requested in the application form and a point scale of 0-5 points (0 being the lowest and 5 being the highest) will be used where a score will be assigned. Such items will be given a weighted score. In some cases, a point scale will not be used for scoring, rather a “met” or “not met” score. When evaluating each scored item, please use the following framework to guide your evaluation of weighted scoring questions:

Score	Label	Description
1	Unacceptable	No response or does not comply with legislative requirements in all or nearly all respects. Not expected to succeed.
2	Poor	Proposal does not comply with legislative requirements in many respects, requiring major response rewrites to conform to requirements. Very limited understanding of the requirement. Inadequate proposal quality. Serious questions about the ability to complete the project on time. High risk of either unacceptable or late performance.
3	Marginal	Proposal complies in most respects with legislative requirements, although some deficiencies or ambiguities remain that require clarification and discussions, although major response rewrites are probably not necessary. Demonstrates a basic understanding of the requirement that is likely adequate for successful performance, but the proposal does not demonstrate more than surface comprehension. The proposal is of moderate quality. Marginally adequate ability to successfully perform a project of this magnitude on time. Moderate risk of unacceptable or late performance; likely would require significant amounts of State involvement to achieve successful completion.
4	Acceptable	Proposal shows a sound approach that meets most requirements, requiring only clarification of minor ambiguities, but requiring no significant response revisions to conform to legislative requirements. Sound quality of the proposed solution. Clearly able to successfully perform a project of this magnitude on time. Low risk of unacceptable and late performance; State involvement may exceed normal contract administration and require frequent guidance.
5	Superior	Proposal shows a superior approach that meets most, if not all requirements and exceeds most requirements in tangible ways, requiring minor or no clarifications and minor or no response revisions to conform to legislative requirements. Superior, comprehensive understanding of requirements. Superior quality of the proposed solution. Exceeds ability to successfully perform a project of this magnitude on time. Minimal or very low risk of unacceptable and late performance; State involvement likely will not exceed normal contract administration.

Application information entry and summary

Use the drop-down to select an applicant:

Select the applicant	Application Number	Budget Criteria Met	Total Score
Applicant 1	1	Yes	10.00

Scoring results

I. Budget/Financials/Engagement			Met
A. Budget			Yes
B. Hospital financial position			Yes
C. Partner engagement/support/collaboration			Yes
II. Quality of Application			Weighted Score
	Score (1-5)	Weight	
A. Completeness of response	5.00	0.10	0.50
B. Ability to execute and complete project	5.00	0.25	1.25
C. Reasonableness of timeline	5.00	0.20	1.00
D. Diversity, Equity, Inclusion	5.00	0.10	0.50
Total Quality of Application Score			3.25
III. Impact to Affordability and Access			Weighted Score
	Score (1-5)	Weight	
A. County Medicaid/Medicare Casemix	5.00	0.10	0.50
B. Statement of need	5.00	0.10	0.50
C. Sustainability of project	5.00	0.40	2.00
D. Impact to Affordability and/or Access	5.00	0.75	3.75
Total Impact to Affordability and Access Score			6.75
Total Score			10.00

Quality of Application

Score the applicant
in the boxes below:

Title	Application Location	What is being reviewed	Yes or No	Comments
Technical response review		Submitted by deadline--date and time of day	Yes	
	Section B, Part I	Application Information Worksheet is complete	Yes	
	Section B, Part II	Project Summary Worksheet is complete	Yes	
	Section B, Part III	Affirmation and Signature is complete	Yes	
	Section B, Part IV	Program design, scope of project, services and goals questions are complete	Yes	
	Section B, Part V	Budget is complete and submitted in the correct format	Yes	
			Written responses are within the page limits for each question	Yes

- If all technical response review questions are answered “yes”, the following application should receive a score of 5 (Superior).
- If no elements of the technical response are considered acceptable, this should receive a score of 1 (Unacceptable).
- The range between 1 and 5 should be assigned based on the completeness of the response: Poor (2), Marginal (3), and Acceptable (4).

*Use answers above
to score in the cell
below*

Title	Application Location	What is being reviewed	Score 1-5	Comments
Completeness of response		Based upon the technical response review and guidance above.	5	

Title	Application Location	What is being reviewed	Score 1-5	Comments
Completeness of response		Based upon the technical response review and guidance above.	5	Score from cell E13 above
Ability to execute and complete project	Section B, Part IV, Q1-4	The project framework and proposal details appear realistic and achievable with clear goals, objectives, and activities.	5	
Reasonableness of timeline	Appendix B Project Summary	The proposed project timeline appears realistic for the proposed project framework and complies with ARPA requirements (to be expended by December 31, 2026).	5	
Diversity, Equity, Inclusion	Section B, Part IV, Q6	The applicant has provided information regarding its DEI strategy and indicated how diverse community needs are met by the project.	5	

Budget, Financials, Engagement

LOOKUP TO Hospital financial position prequalified ^{TRUE} Score the applicant in the boxes below:

For applicants listed in Appendix D

Title	Application Location	What is being reviewed	Met?	Comments
Hospital financial position		The applicant is in the bottom 40% of net patient revenues for the three-year average of 2016, 2017, and 2018 or the bottom 6% fund balance for 2019 as determined by the Department's review of CMS 2552-10 Medicare Cost Reports. age and a justification for the need for such upgrades	Yes	This field is auto populated
Partner engagement, support, and collaboration	Section B, Part IV, Q5	The applicant included the names of partners engaged in or supporting this proposal (if applicable) including the role they will play in the project.	Yes	
Budget	Section B, Part V and Appendix E	The applicant has included responses to Q9-14 as applicable and provided a completed budget worksheet, requesting funds between \$100,000 and the \$650,000 cap.	Yes	

For applicants NOT listed in Appendix D

Title	Application Location	What is being reviewed	Met?	Comments
Hospital financial position if the applicant does not meet the financial need requirement	Section B, Part IV, Q8	The applicant has submitted sufficient additional financial supporting information (such as low patient revenues and/or cash reserves) to justify meeting the financial need requirement.	Not Met	
	Section B, Part IV, Q2	For age of plant or equipment for capital investment projects only. The applicant has provided detailed information regarding current equipment/plant age and a justification for the need for such upgrades.		
Partner engagement, support, and collaboration	Section B, Part IV, Q5	The applicant included the names of partners engaged in or supporting this proposal (if applicable) including the role they will play in the project.	Not Met	
Budget	Section B, Part V and Appendix E	The applicant has included responses to Q9-14 as applicable and provided a completed budget worksheet, requesting funds between \$100,000 and the \$650,000 cap.	Not Met	

Impact to Affordability and/or Access

LOOKUP TO Prepopulated Case Mix Score the applicant in the boxes below: 80.0%

Title	Application Location	What is being reviewed		Score 1-5	Comments
County Medicaid/Medicare	n/a	Casemix as a percentage of population: 67% and above = 5 points, 54-66% = 4 points, 47-53% = 3 points, 31-45% = 2 points, and 30% and below = 1 point.		5	This field is auto populated
Statement of need	Section B, Part IV, Q1	The applicant has described the need in the community and how the proposal seeks to address this need, clarifying the problem in terms of resources and/or capacity challenges. If appropriate, the applicant has identified specific populations that are supported by the proposal and how. The expected change anticipated as a result of the project and community impact are specified.		5	
Impact to affordability and/or access	Section B, Part IV, Q3	The overall proposal demonstrates an ability to impact affordability and/or access in the community including addressing the following as applicable:	Access to specialty care. The applicant described how the project will increase access to specialty care (if applicable).	5	
	Section B, Part IV, Q4		Care coordination. The applicant provided information on how the project will improve care coordination including how it ensures the community has access to care locally (if applicable) and included the names of the organizations they will collaborate with.		
Sustainability of project	Section B, Part IV, Q7		The applicant included a description of how the project's goals and objectives will be sustained for a minimum of five years after the Rural Stimulus Grant funds has been expended.	5	