

FLEX GRANT GUIDANCE SUMMARY

The Medicare Rural Hospital Flexibility (Flex) Program provides funding to state governments or other designated entities to support critical access hospitals (CAHs) in quality improvement, quality reporting, performance improvement and benchmarking, designating facilities as CAHs, population health, and the provision of rural emergency medical services (EMS). Only states with CAHs or hospitals eligible to convert to CAH status are eligible to participate in the Flex Program.

Flex funding encourages the development of cooperative systems of care in rural areas, joining together CAHs, providers of EMS, clinics, and health practitioners to improve efficiencies and quality of care. The Flex Program requires states to develop rural health plans and funds their efforts to implement community-level outreach and technical assistance. The overall goal of the Flex Program is to ensure that high- quality health care is available in rural communities and aligned with community needs. The long-term objectives of the Flex Program are to enable CAHs, including CAH-owned (provider based) clinics, and rural EMS agencies to:

- Show and improve quality of care
- Stabilize finances and maintain services
- Adjust to address changing community needs
- Ensure patient care is integrated throughout the rural health care delivery system

The Flex grant is organized into six program areas with program goals, objectives and related activities:

1. CAH Quality Improvement (required)
2. CAH Operational and Financial Improvement (required)
3. CAH Population Health Improvement (optional)
4. Rural EMS Improvement (optional)
5. Innovative Model Development (optional)
6. CAH Designation (required if assistance is requested by rural hospitals)

The Flex Program is administered through the Federal Office of Rural Health Policy (FORHP) at the Health Resources and Services Administration (HRSA) of the US Department of Health and Human Services (HHS). The Flex funding to states is administered as a cooperative agreement in both competitive and non-competitive grant cycles. Fiscal year (FY) 2019

(September 1, 2019 – August 31, 2020) is the first year of a 5-year cooperative agreement cycle. A summary of the FY 2019 Flex cooperative agreement guidance goals, objectives and activities can be found in Section 1 of this manual. Flex cooperative agreement guidance for each year of the grant cycle can be accessed on the [Flex Cooperative Agreement Guidance](#) page of the [Technical Assistance and Services Center \(TASC\) website](#).

The application for the Flex cooperative agreement occurs electronically through the [grants.gov website](#). Each program year is September 1 – August 31.

The [State Flex Program Core Competencies for Excellence Guide](#) includes a section dedicated to managing the Flex Program, with tips and resources for managing the cooperative agreement and resources for grant writing.

For an easy-to-use manual on writing Federal grant applications, with tips on grant management, please review the [Federal Grant Writing Manual](#).

A [Federal Grant Writing Manual Workshop](#) was held in September 2014. Resources from this Workshop, including many examples related to the Flex Program, are available online.

For information on how to apply for a federal grant, please visit the [Grants.gov Workspace](#). For requirements for Federal Funding Accountability and Transparency Act (FFATA) implementation, please visit the [HRSA website](#). For technical assistance resources from HRSA's Grants Management, please visit [the Manage Your Grant Workshop webpage](#). Consider becoming a HRSA grant reviewer. For more information, please visit [the HRSA Grant Reviewers webpage](#).