**Section 596.120 Project Requirements**

a) Projects funded through this Subpart shall respond to requests for proposals distributed by the Department and delineating project expectations.

b) Requests for proposals prepared by the Department shall address one or more of the following goals:

1) Use innovative methods that expand the ability of existing health and social service providers located in or near the service area to meet the overall primary care needs within a project's service area;

2) Increase the numbers or types of primary health care providers within a designated shortage area;

3) Increase the level of collaborative working arrangements among a variety of health and social service providers in a project service area;

4) Target rural areas (identified by either the federal or State government) as having the greatest need for primary health care, as determined by the HPSA score.

c) Projects shall have a director who is responsible for administrative and fiscal management of the project.

d) Projects that establish a primary health care clinic using grant funds under this Subpart shall meet the following minimum requirements:

1) When eligible, seek certification as either a Rural Health Clinic, a Federally Qualified Health Center or an FQHC Look-Alike;

2) Make services available and accessible to all residents of the project's service area;

3) Ensure that physicians with whom the clinic contracts or whom the clinic employs have staff privileges at a minimum of one hospital in or near the service area and are responsible for arranging 24 hour coverage; and

4) Have referral arrangements with other service providers to assist clinic patients in receiving needed health and social services.

e) Projects shall demonstrate development of a consortium of agencies and providers, with involvement of a minimum of two separate agencies or service providers. Consortium members may include urban entities. Services shall be targeted to residents of rural and downstate areas, and the majority of funds shall be used and the applicant shall be located in a rural or downstate area.

f) Evidence of the solicitation and consideration of input and potential participation in the project by the local health department, and other health and social service providers in or near the service area, shall be included in an application. Thisevidence may include copies of correspondence soliciting input.

g) Projects selected for funding that build on existing activities shall demonstrate an increase in service recipients and maintenance of or an increase in the level of previously available funds used to support the project prior to receipt of funds under this Part.

h) Projects that propose to provide health care diagnostic and treatment services shall have written statements of cooperation between any other service area providers receiving state or federal grant support for related services.

i) Projects that propose to provide health care diagnostic and treatment services shall submit as part of the application a projected budget estimating entire project costs and all revenue sources.

j) Projects shall document that local funds (i.e., non-State, non-federal) equivalent to 50 percent of the annual project cost will be available and used.

(Source: Amended at 35 Ill. Reg. 14147, effective August 4, 2011)