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**Revised - Addendum No. 2 to the Notice of Funding Availability (NOFA)  
For Denali Commission Primary Care Projects – FY 03**

**Opportunity for Organizations with “Small” Clinics to Compete for Cost Share Match  
Funding from other sources**

This Addendum No. 2 to the FY03 Primary Care NOFA announces the opportunity to the “Small” clinic program for cost share match funding from the Indian Health Service (IHS) Tribal Equipment Fund (approximately \$590,000) and from the State of Alaska Department of Community and Economic Development (DCED) Community Development Block Grant (CDBG) program (up to \$1.6 Million). Please disregard the Addendum dated 7-30-03.

**Background:** The Commission in working with our health facility program partners has been offered a one time only opportunity to prioritize IHS and DCED funding to Denali Commission clinic projects. As cost share match has been an obstacle for some communities and health organizations from presenting “construction ready” clinic projects this offers a unique opportunity for the funding partners and the communities to move clinic projects forward.

**“Large” Clinic and “Repair/Renovation” programs:** These programs are unchanged by this announcement.

**Conceptual Planning Applications for all Clinic Programs:** As of June 23, 2003 the Commission has been accepting applications for clinic projects. Complete Section 2 and 3 of the Request For Proposal ([www.denali.gov](http://www.denali.gov)) and submit to the Commission.

**“Small” Clinic program:** The process for funding “Small” clinics remains unchanged unless otherwise noted within this Addendum.

In short, communities/organizations that have been approved for conceptual planning and/or design funding in FY02 and FY03 as of 7-30-03 (see list below) must have an approved business plan and site plan checklist in order to compete for Commission, IHS and DCED funding through this Addendum.

These two referenced documents are available at the Commission’s website: [www.denali.gov](http://www.denali.gov) at the “Health Care Facilities” tab and then at the “FY03 Primary Care RFP” tab. These communities/organizations are encouraged to call their assigned technical assistance advisor for

questions related to this announcement. See the website for the technical assistance advisor community/organization assignments and contact information.

<b>FY02/03 Funded Conceptual Planning – “Small” Clinics – Eligible                      for Addendum No. 2 Cost Share Funding</b>			
<b>Regional                      Health Corp</b>		<b>Regional                      Health Corp</b>	
<b>Community</b>	<b>Community</b>	<b>Community</b>	<b>Community</b>
APIA	Atka	SCF	Tyonek
BBAHC	Chignik Lake	SEARHC	Klukwan
BBAHC	Clark's Point	TCC	Evansville
BBAHC	Ekwok	TCC	Hughes
BBAHC	Goodnews Bay	TCC	Huslia
BBAHC	Kokhanok	TCC	Kaltag
BBAHC	Koliganek	TCC	Koyukuk
BBAHC	Levelock	TCC	Minto
BBAHC	Manakotak	TCC	Nikoli
BBAHC	Nondalton	TCC	Nulato
BBAHC	Perryville	TCC	Stevens Village
BBAHC	Platinum	TCC	Takotna
BBAHC	Twin Hills	YKHC	Akiak
CATG	Arctic Village	YKHC	Alakanuk
CATG	Birch Creek	YKHC	Chefornak
CATG	Chalkyitsik	YKHC	Chuathbaluk
CATG	Circle	YKHC	Eek
CATG	Venetie	YKHC	Holy Cross
KANA	Akhiok	YKHC	Lime Village
KANA	Karluk	YKHC	Marshall
KANA	Old Harbor	YKHC	Napaskiak
KANA	Port Lions	YKHC	Tununak
Maniilaq	Buckland		Chitina
Maniilaq	Deering		Eklutna
Maniilaq	Kobuk		Port Alsworth
NSHC	Gambell		
NSHC	Little Diomedede		
NSHC	Savoonga		
NSHC	Teller		

The Commission through its Technical Assistance Subcommittee (TASC) will evaluate the clinic business plans and the Alaska Native Tribal Health Consortium (ANTHC) will evaluate the site plan checklists. Both documents shall be submitted to the Denali Commission for consideration.

The following specific elements apply to this Addendum.

1. Funding is for completing cost share match for the eligible clinic square footage allowed by Commission space guidelines. Additional space or multi-use space is the responsibility of the applicant.
2. IHS Tribal Equipment funding is for communities that are eligible for these funds. If you have questions about eligibility, please contact Mr. Doug Ott with IHS at (907)-729-3610. It is the Commission’s understanding that both Port Lions and Savoonga have received recently Tribal Equipment funding and are not eligible for Addendum No. 2 IHS funding.
3. DCED-CDBG funding is for municipalities that meet CDBG program criteria including Low to Moderate Income (LMI) data. Please contact Jill Davis, Grant Administrator, at 452-4468 to confirm eligibility.
4. Although DCED-CDBG funding is for municipalities, DCED will allow a municipality to receive the funding and then transfer clinic interest and ownership to a Tribal Government (in those cases where the Tribe will own the clinic facility).
5. The Commission will determine the funding amounts from DCED and IHS so as to maximize the number of clinic projects funded for construction.
6. The Commission will accept the business plans and site plan checklists as they come in and forward them to the TASC members for review. The TASC will meet on September 3rd to consider all plans that have been submitted. If there are more proposed clinic projects approved for construction than available IHS and DCED cost share funding, then those projects that are more construction ready will be selected. Construction readiness is based upon completed clinic design including site adaptation, permits secured, and site control in hand.
7. The Commission will post on its website when all DCED and IHS funds have been exhausted.
8. The Commission is presently working with both DCED and IHS on agreements on the transfer of funding for these clinic projects. ANTHC shall serve as the Commission’s program manager for the Small Clinic program. It is not yet known how the DCED and IHS funding will be transferred for each clinic project. It is expected that this will be determined by the time ANTHC drafts a sub-award document for those communities selected through this Addendum for cost share match and Commission construction funding.