

The workplan is a separate document from the text-based Project Narrative. It is a succinct overview of work plan is not a narrative. The work plan is organized by the Flex program areas and activity categories 2024 - FY 2029. This is a work plan for FY24, or year 1, but it is intended to be a planning document for expect you to have a completed plan for all 5 years.

**Only include the program areas and activity categories in the work plan that will be part of your this work plan template prior to submission.**

**Note on color coding in the template:**

Quality Improvement = blue

Financial and Operational = green

Population Health = red

EMS = orange

CAH Designation=yellow

**Work Plan Instructions:** Below are definitions for each category of the work plan, for specific e:  
<https://www.ruralcenter.org/resources/flex-program-funding-guidance#fy24-structure>  
<https://www.ruralcenter.org/resources/flex-program-funding-guidance#workplan-example>

**Activities Description:** This is where you will provide the description of your QI activities and proje outcome. Activities can include things such as your needs assessment, networking meetings, one-time activities or a series of activities that will have associated outcomes. Such as a learning collaborative,

**Program Area Impact Goal:** The impact is the result or effect that is attributed to a project or progr and can be intended or unintended, positive or negative. Your impact goal for QI might be, "demonstr

**Project Type:** The project type is a dropdown box for you to choose the overarching theme of the act activity, and should have a defined and measurable outcome. For more examples on outcomes and de

**Expected Outputs:** Measures that an activity occurred, stepping stones used to move forward. Exam you will fill out the outputs you are expecting, for example "All 15 CAHs will receive MBQIP report

**Actual Outputs:** This is where you will report the actual outputs from the activity, for example, "All completed during progress reporting.

**Staff Responsible:** This is where you will denote who the main party responsible for carrying out the Hospital Association. It might be subject to change later on and that's okay.

**Engagement Impact:** This section will only be completed during progress reporting. This is where y say something like "The hospitals left the training indicating they felt much more prepared to report 5 improve quietness at night had been implemented".

**Outcomes:** Defined as a measurable change resulting from an activity or series of activities. Outcome outcomes, you might only have short term, or maybe you don't have two different intermediate outco

age in your Grants.gov application package.

the program objectives, goals, activities, and projected outcomes in table formats listed in the document Medicare Rural Hospital Flexibility Program Structure or you to look forward to all 5 years, and document outcomes as such. FORHP c

**state Flex Program. All other areas and activity categories should be remov**

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**examples please reference the Flex Program Structure Document and the Fl**

cts. An activity is a specific action taken to produce a result, but that may not al e webinars, reporting support, and report and information dissemination. Project an educational cohort, etc. In the description you can denote if activities/projec

um. Impact is often used to refer to higher level effects of a program that occur i ably improve the care provided by the state's CAHs"

ivity or project. For QI you can choose from the following. As a reminder, a pro finitions, reference the Flex Program Structure document and the Flex Program

ples include number of meetings, education programs, webinars provided. Whei s" or "5 CAHs will receive HCAHPS training".

15 CAHs received MBQIP reports" or "3 CAHs participated in HCAHPS traini

: activity or project will be. For example, it could be the Flex Coordinator, or the

ou will talk about the qualitative outcomes, it's a chance to tell the story of the a SDOH measures" or "the hospitals reported that patients said they were sleeping

es can be short-term, intermediate, and long-term. You might not have short, intermediate, and long-term, but you might have short and intermediate, or intermediate and long-term, or short and long-term, or only have one. These are all acceptable scenarios. You will notice that I

Grant Number: XXXXXXXXXX  
Funding Opportunity Number: HRSA-19-024  
Project Title: Medicare Rural Hospital Flexibility Program

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How many Critical Access Hospitals in your state are participating in **any** Flex-funded quality improvement initiatives (this can include networking meetings, discussing MBQIP data reports, receiving TA, or participating in a larger project)? (Enter number here)

Estimate the dollar amount of your annual budget that is spent in quality improvement (Enter dollar amount here)

Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Program Area 1: Critical Access Hospital (CAH) Quality Improvement (a minimum of one activity is required)				
Program Area Impact Goal:				
Quality Improvement Needs Assessment (required)				
	Project Type Dropdown			
Quality Improvement Education (information dissemination, meetings)				
	Project Type Dropdown			
Quality Improvement Education (information dissemination, meetings)				
	Project Type Dropdown			
Quality Measure Reporting Support				
	Project Type Dropdown			
Quality Improvement Project				

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Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
	<i>Project Type Dropdown</i>			
<b>Facility Tracking (complete for progress reporting only)</b>		<b>Outcome(s)</b>	<b>Baseline</b>	<b>Goal</b>
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				
<b>Quality Improvement Project</b>				
	<i>Project Type Dropdown</i>			
<b>Facility Tracking (complete for progress reporting only)</b>		<b>Outcome(s)</b>	<b>Baseline</b>	<b>Goal</b>
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				
<b>Quality Improvement Project</b>				
	<i>Project Type Dropdown</i>			
<b>Facility Tracking (complete for progress reporting only)</b>		<b>Outcome(s)</b>	<b>Baseline</b>	<b>Goal</b>
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				

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Engagement Impact (complete for progress reporting only)	Short-term Expected Outcomes Effects occurring more immediately, typically within the first year	Intermediate Expected Outcomes Effects that occur in the first 1-2 years
	<i>Expected outcomes from your CAH Quality Assessment and Inventory</i>	
	Short-term Outcome Description	
	Goal: Overall Result:	
	Short-term Outcome Description	Intermediate Outcome Description

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Engagement Impact (complete for progress reporting only)	Short-term Expected Outcomes Effects occurring more immediately, typically within the first year	Intermediate Expected Outcomes Effects that occur in the first 1-2 years
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:
	Short-term Outcome Description	Intermediate Outcome Description
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:
	Short-term Outcome Description	Intermediate Outcome Description
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:



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Intermediate Expected Outcomes Effects that occur in the first 1-2 years	Long-term Expected Outcomes Effects that occur after 3 years	Long-term Expected Outcomes Effects that occur after 3 years
<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>
Notes:	Notes:	Notes:
<b>Intermediate Outcome Description</b>	<b>Long-term Outcome Description</b>	<b>Long-term Outcome Description</b>
<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>
Notes:	Notes:	Notes:
<b>Intermediate Outcome Description</b>	<b>Long-term Outcome Description</b>	<b>Long-term Outcome Description</b>
<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>
Notes:	Notes:	Notes:

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Performance Year Work Plan for FY 2023  
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How many Critical Access Hospitals in your state are participating in **any** Flex-funded financial or operational improvement initiatives (this can include networking meetings, discussing CAHMPAS data reports, receiving TA, or participating in a larger project)? (Enter number here)

Estimate the dollar amount of your annual budget that is spent in financial and operational improvement (Enter dollar amount here)

Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Program Area 2: CAH Financial and Operational Improvement (a minimum of one activity is required)				
Program Area Impact Goal:				
Assessment (statewide or individual)				
	Project Type Dropdown			
Education (information dissemination, meetings)				
	Project Type Dropdown			
Education (information dissemination, meetings)				
	Project Type Dropdown			
CAH Financial and Operational Improvement Project				
	Project Type Dropdown			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal
Facility 1				

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Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Facility 2				
Facility 3				
Facility 4				
Facility 5				
CAH Financial and Operational Improvement Project				
	<i>Project Type Dropdown</i>			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				
CAH Financial and Operational Improvement Project				
	<i>Project Type Dropdown</i>			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				

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Engagement Impact (complete for progress reporting only)	Short-term Expected Outcomes Effects occurring more immediately, typically within the first year	Intermediate Expected Outcomes Effects that occur in the first 1-2 years
	Short-term Outcome Description	Intermediate Outcome Description
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:

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Intermediate Expected Outcomes Effects that occur in the first 1-2 years	Long-term Expected Outcomes Effects that occur after 3 years	Long-term Expected Outcomes Effects that occur after 3 years
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:

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Intermediate Expected Outcomes Effects that occur in the first 1-2 years	Long-term Expected Outcomes Effects that occur after 3 years	Long-term Expected Outcomes Effects that occur after 3 years
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:



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How many Critical Access Hospitals in your state are participating in **any** Flex-funded population health improvement initiatives (this can include networking meetings, receiving TA, or participating in a larger project)? (Enter number here)

Estimate the dollar amount of your annual budget that is spent in population health improvement (Enter dollar amount here)

Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
<b>Program Area 3: CAH Population Health (optional)</b>				
<b>Program Area Impact Goal:</b>				
<b>Needs Assessment (individual or statewide)</b>				
	<i>Project Type Dropdown</i>			
<b>Education (information dissemination, meetings)</b>				
	<i>Project Type Dropdown</i>			
<b>Education (information dissemination, meetings)</b>				
	<i>Project Type Dropdown</i>			
<b>Population Health Project</b>				
	<i>Chronic Care Management</i>			
<b>Facility Tracking (complete for progress reporting only)</b>		<b>Outcome(s)</b>	<b>Baseline</b>	<b>Goal</b>
Facility 1				
Facility 2				

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Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Facility 3				
Facility 4				
Facility 5				
Population Health Project				
	Project Type Dropdown			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				

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Engagement Impact (complete for progress reporting only)	Short-term Expected Outcomes Effects occurring more immediately, typically within the first year	Intermediate Expected Outcomes Effects that occur in the first 1-2 years
	Short-term Outcome Description	Intermediate Outcome Description
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:

Grant Number: XXXXXXXXXX  
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Engagement Impact (complete for progress reporting only)	Short-term Expected Outcomes Effects occurring more immediately, typically within the first year	Intermediate Expected Outcomes Effects that occur in the first 1-2 years
	Short-term Outcome Description	Intermediate Outcome Description
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:

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Intermediate Expected Outcomes Effects that occur in the first 1-2 years	Long-term Expected Outcomes Effects that occur after 3 years	Long-term Expected Outcomes Effects that occur after 3 years
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:

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Intermediate Expected Outcomes Effects that occur in the first 1-2 years	Long-term Expected Outcomes Effects that occur after 3 years	Long-term Expected Outcomes Effects that occur after 3 years
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:

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How many Critical Access Hospitals in your state are participating in **any** Flex-funded EMS improvement initiatives (this can include networking meetings, receiving TA, or participating in a larger project)? (Enter number here)

Estimate the dollar amount of your annual budget that is spent in EMS improvement (Enter dollar amount here)

Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Program Area 4: Rural Emergency Medical Services (EMS) Improvement (optional)				
Program Area Impact Goal:				
Assessment (statewide or individual) and action planning				
	Project Type Dropdown			
Education (information dissemination, meetings)				
	Project Type Dropdown			
Education (information dissemination, meetings)				
	Project Type Dropdown			
Education (information dissemination, meetings)				
	Project Type Dropdown			
EMS Project				
	Project Type Dropdown			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal

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Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				
EMS Project				
	Project Type Dropdown			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				
EMS Project				
	Project Type Dropdown			
Facility Tracking (complete for progress reporting only)		Outcome(s)	Baseline	Goal
Facility 1				
Facility 2				
Facility 3				
Facility 4				
Facility 5				



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Engagement Impact (complete for progress reporting only)	Short-term Expected Outcomes Effects occurring more immediately, typically within the first year	Intermediate Expected Outcomes Effects that occur in the first 1-2 years
	Short-term Outcome Description	Intermediate Outcome Description
	Goal: Overall Result:	Goal: Overall Result:
Result	Notes:	Notes:

Grant Number: XXXXXXXXXX

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<b>Engagement Impact</b> <b>(complete for progress reporting only)</b>	<b>Short-term Expected Outcomes</b> Effects occurring more immediately, typically within the first year	<b>Intermediate Expected Outcomes</b> Effects that occur in the first 1-2 years
	<b>Short-term Outcome Description</b>	<b>Intermediate Outcome Description</b>
	<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>
<b>Result</b>	<b>Notes:</b>	<b>Notes:</b>
	<b>Short-term Outcome Description</b>	<b>Intermediate Outcome Description</b>
	<b>Goal:</b> <b>Overall Result:</b>	<b>Goal:</b> <b>Overall Result:</b>
<b>Result</b>	<b>Notes:</b>	<b>Notes:</b>

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Intermediate Expected Outcomes Effects that occur in the first 1-2 years	Long-term Expected Outcomes Effects that occur after 3 years	Long-term Expected Outcomes Effects that occur after 3 years
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:
Intermediate Outcome Description	Long-term Outcome Description	Long-term Outcome Description
Goal: Overall Result:	Goal: Overall Result:	Goal: Overall Result:
Notes:	Notes:	Notes:

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Estimate the dollar amount of your annual budget that is spent in CAH designation (Enter dollar amount here)

Activities Description	Project Type	Expected Outputs	Actual Outputs (complete for progress reporting only)	Staff Responsible
Program Area 5: CAH Designation (required if requested)				
Program Area Impact Goal: Support rural hospitals who want to seek or maintain appropriate Medicare participation status to meet community needs				
CAH Conversions and Transitions				
	Project Type Dropdown			

As required by the program authorizing legislation, State Flex Programs must assist with appropriate conversion of small rural hospitals to CAH status when requested. Flex programs must assist hospitals in evaluating the effects of conversion to CAH status.

This may include assisting with financial feasibility studies for hospitals considering conversion to CAH status (CAH Conversion) as well as feasibility studies for reopening closed rural hospitals or converting CAHs to other types of facilities (CAH Transition). There are no outcomes to report for this program area, only outputs.

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<b>Engagement Impact</b> <b>(complete for progress reporting only)</b>