

FAQ: Community Capacity Grants

Eligibility

- Do we have to already be enrolled in HOKU to apply?
 - No, you can apply if you're currently delivering similar/related services outside Medicaid and *intend* to enroll as an eligible HRSN provider type.
 - Applicants who are not yet enrolled in the HOKU system may apply to receive funding covering the full scope of allowable activities but are only eligible to receive a 1-time payment of up to \$50,000 in funding associated with Program Participation Assessment, until they have enrolled in the HOKU system.
- Where can an organization enroll as a HOKU provider?
 - Use the HOKU Provider Enrollment System:
<https://medquest.hawaii.gov/en/plans-providers/Provider-Management-System-Upgrade.html>.
 - Organizations that are not yet enrolled may still be eligible to apply if they intend to enroll as an eligible HRSN provider type and currently provide similar or related services in Hawai'i.
- We are a supplier (e.g., a landlord or farmer), not a direct service provider, can we apply?
 - No, not directly. An eligible HRSN provider can apply for funds to pay you for allowable services, but you cannot apply yourself.
- Do we need a recent external audit?
 - Yes, unless you're newly established, in which case a viable financial plan can substitute.
- Can multiple organizations apply together?
 - Yes, joint applications are allowed with one lead entity; all co-applicants must independently meet eligibility.
- Can we apply if we serve only one island, or don't yet serve Medicaid members statewide?
 - Yes.

- Can you provide an example of why one might request co-applicant funding versus establishing a subcontract arrangement with partners?
 - A co-applicant arrangement may be appropriate when multiple eligible organizations jointly plan and implement grant-supported activities and share responsibility for the proposed work. For example, eligible HRSN providers could develop shared infrastructure, workforce capacity, or service-delivery capabilities through one application. A subcontract arrangement may be more appropriate when the applicant is the primary grant recipient and purchases services or support from another organization. Organizations that are not eligible HRSN providers may still benefit through allowable contractual arrangements with eligible applicants. All co-applicants must independently meet eligibility requirements, and the lead applicant remains responsible for application accuracy and grant compliance.
- Could health treatments delivered in partnership with an organization providing housing-related supports or medical respite qualify under the grant? Or must [APPLICANT] directly provide one of the designated HRSN services?
 - Community Capacity Grants can fund essential activities needed to address the organization-specific needs of current and future HRSN providers across four domains: Business and Operational Practices; Technology Investments; Workforce Development; Education and Outreach. The application would need to clearly describe each organization's role and the connection between the requested investment and capacity-building for HRSN service delivery. Examples of allowable and unallowable costs under this funding opportunity can be found here: <https://www.auw.org/wp-content/uploads/2026/09/CCG-Allowable-and-Prohibited-Costs.pdf>.
- Can [APPLICANT] apply independently as a healthcare practice without 501(c)(3) status or a fiscal sponsor?
 - Nonprofit status or a fiscal sponsor are not identified as a threshold requirement in the CCG eligibility guidance. Key to eligibility is whether the organization meets all applicant eligibility criteria as a current or future HRSN provider. This includes enrollment or intent to enroll in HOKU as an eligible HRSN provider type, a direct role in delivering at least one eligible HRSN service, demonstrated Hawai'i experience and capability, culturally and linguistically appropriate service capacity, financial stability, and required attestations. A for-profit healthcare practice may therefore apply independently if it meets the full provider and program requirements.

- If our proposed activities do not independently meet the HRSN requirements, could we participate through an eligible community organization?
 - Organizations that do not have a direct role in Medicaid service provision are not eligible for Community Capacity Grant funding. Other organizations may still benefit from Community Capacity Grant funding through allowable arrangements with eligible applicants, e.g., an eligible HRSN provider apply as the lead applicant and engage another organization as a partner or subcontractor under a clearly defined scope within an allowable funding category. If organizations submit a joint application as co-applicants, each co-applicant must independently meet the eligibility requirements. The lead applicant would remain responsible for the application, use of funds, grant compliance, monitoring, and reporting.

Funding uses

- What can the money actually pay for?
 - Four domains: business/operational practices, technology, workforce development, education/outreach
- Can we use it for a vehicle, building renovation, or equipment like an industrial refrigerator?
 - No, those are explicitly prohibited. Please see document labeled "Allowable and Prohibited Costs".
- Can we use it for staff salaries?
 - Yes, for HRSN-related roles, including hiring, training, admin support, etc.
- Is there a minimum or maximum award amount?
 - The suggested range for Round 1 awards is from \$100,000 per year to \$1,000,000 per year. Award ranges for Rounds 2 and 3 are to be determined.
- Can we request multi-year funding, or does it have to be spent in one cycle
 - Applications may be for terms of 1 year or longer; all funds must be expended by Oct. 31, 2029.
- Can grant funds duplicate other funding we already receive for the same purpose

- No, that is explicitly prohibited, and awardees must attest to non-duplication.
- Are incremental liability insurance costs resulting from participation in the HRSN program allowable?
 - No. Incremental liability insurance costs associated with the program are not an allowable use of Community Capacity Grant funding.

Application process

- Can we submit more than one application per cycle?
 - No, only one application per cycle.
- Is only one application allowed per provider, for one need?
 - Applicants may submit only one application per Funding Round. Organizations should include all requested funding needs in that single application and associated budget. Applicants may request funding across multiple allowable Community Capacity Grant domains, including business and operational practices, technology investments, workforce development, and education and outreach. Organizations funded in one round may apply in later rounds, but prior awards will be reviewed to prevent duplicate funding of the same activities.
- If my organization receives funding in Round 1, can I apply in subsequent rounds?
 - Yes, one application per funding round: If you receive funding in Round 1, you can apply in Round 2 and/or Round 3; if you receive funding in Round 2, you can apply in Round 3.
- If we're denied, can we appeal?
 - No, award decisions are final, but you can apply in a future cycle.
- Who reviews and decides on applications?
 - The QI Health Plans will review the applications and have final decision-making authority.
- What are the reporting requirements, specifically financial reporting?

- Specific reporting templates, submission schedules, and reporting frequency will be communicated as they are confirmed. Awardees should expect to maintain documentation sufficient to support the use of grant funds and participate in monitoring activities if requested.
- What is required in the financial audit?
 - The application requires submission of the applicant's most recent external audit. The purpose of the audit requirement is to help demonstrate that the organization is financially stable and capable of responsibly managing public funds. Applicants should submit the most recent completed audit available at the time of application. Organizations that do not have an audit available may use the viable financial plan process.
- For organizations considering CIS+ specifically, what are the most common readiness gaps Med-QUEST and the QI Health Plans are currently seeing among prospective providers?
 - Organizations should focus their applications on the specific operational, workforce, technology, or implementation needs that must be addressed to support successful participation in HRSN programs.
- What kind of documentation is acceptable for an organization's proof of demonstrated capability?
 - Capability is defined as having either: i) One (1) or more years of relevant experience providing HRSN, similar, or related services in Hawai'i; OR ii) Demonstrated experience operating in Hawai'i for at least one (1) or more years and capacity to participate in the delivery of one (1) or more HRSN services. Applicants should submit documentation that directly substantiates the capability described in the application. Examples may include, but are not limited to, grant award or performance records, service reports, program descriptions, de-identified utilization or outcome summaries, staff qualifications, policies or workflows, licensing or accreditation records where applicable, and other records showing Hawai'i operations and relevant service-delivery capacity. Applicants should explain how it demonstrates capability to provide or participate in an eligible HRSN service.

Post-Award

- What do we have to report, and how often?
- Can we shift funds between budget categories after approval?
 - Minor reallocations (0-10% of the total budget) are allowed if they don't change the funding's purpose; changes over 10% of the total budget need approval.
- What if we don't spend all the funds by the end of the demonstration period (Dec 31, 2029)?
 - All funds must be expended by Oct. 31, 2029. Unspent funds must be returned.
- Are we required to participate in the UH SSRI evaluation (interviews, site visits, etc.)?
 - Yes, participation is a condition of the award.