Request for Proposals (RFP): Specialty Care

Release Date: May 1, 2017
Letter of Intent Due Date: June 16, 2017

Introduction

This RFP provides instructions and criteria that applicants must meet to submit proposals for the '**Specialty Care'** funding opportunity described herein. Applicants should submit proposals in accordance with this RFP.

Summary

Kaiser Permanente Colorado plans to invest up to $1,000,000 over three (3) years to support up to four (4) grantees to increase/improve access to specialty care for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals).

Specialty care refers to medical care provided by a clinician with advanced training and specialized clinical expertise in such specialty areas as cardiology, dermatology, and rheumatology. Specialty care does not include urgent and trauma care, family practice, or internal medicine. This funding opportunity is open to organizations that have identified access to specialty care as a prioritized need and have an established work group in place to address the issue. Applicants are not required to have an existing, implemented specialty care program, but must demonstrate planning and/or progress toward implementation.

Selected grantees will work together as a cohort to identify and implement ways to increase connectivity and scalability of specialty care programs across organizations, service areas, and systems.

The two outcomes of this funding opportunity that applicants should address are:

- Work collaboratively with a cohort of grantees to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions
- Increase/improve access to specialty care for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals) through expansion of an existing program or implementation of a new program already in the planning stages

Timeline

RFP Issuance:	May 1, 2017
Webinar:	May 11, 2017, 11:00 a.m. MT
Letter of Intent Due:	June 16, 2017, 5:00 p.m. MT

Invitation to Apply:	By July 14, 2017
Proposals Due:	**August 31, 2017, 5:00 p.m. MT**
Interviews:	September 2017
Funding Notification:	December 8, 2017

Award Information

Total Funds Available:	Up to $1,000,000
Number of Awards:	Up to four (4)*
Amount of Awards:	Up to $100,000 per year ($300,000 total) per awardee
Grant Period:	March 1, 2018 - March 1, 2021

Dependent on total funding amount requested by applicants. Final award amounts may vary from requested amount.

Eligibility Requirements

Eligible organizations must be a Colorado 501(c)(3) in good standing with the IRS. In addition, organizations must provide services within Kaiser Permanente's Service Area (defined as providing services in one or more of the following counties): Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Crowley, Custer, Denver, Douglas, Eagle, El Paso, Elbert, Fremont, Gilpin, Grand, Jefferson, Larimer, Lincoln, Otero, Park, Pueblo, Summit, Teller and Weld. Applications from a consortium of organizations are allowed; the consortium must identify a lead organization to serve as the applicant.

For more information on specific eligibility requirements, please read the Eligibility section of this RFP on page six (6).

Communications

Kaiser Permanente will facilitate a webinar on **May 11, 2017** from 11:00 a.m. to 12:00 p.m. MT. Participants will receive an overview of the RFP goals and expectations of grantees. To attend the webinar, please rsvp to co-contributions@kp.org to receive log-in information. Email your name, email address, and phone number.

Please email additional questions after the webinar to co-contributions@kp.org. Updated questions and answers will be posted on kp.org/share/co during the open submission time period.

Technical Assistance

For technical support regarding the online submission process, please email co-contributions@kp.org. We'll respond to technical questions no later than 48 hours after receipt. Please put specialty care RFP-technical assistance in the subject line of the email.

Table of Contents

1. Background and Overview of the Funding Opportunity

A. About Kaiser Permanente Colorado

Kaiser Permanente Colorado is the state's largest nonprofit health plan, working to improve the lives and health of all Coloradans for 48 years. We are comprised of the Kaiser Foundation Health Plan of Colorado and the Colorado Permanente Medical Group—one of the state's largest medical groups with more than 1,200 physicians. We provide comprehensive care for our 690,000 Kaiser Permanente Colorado members through 31 medical offices across the state—from Pueblo to Greeley and now in the mountains in Summit and Eagle counties. We are committed to our social mission and in 2016, proudly directed more than $118 million to community benefit programs to improve the health of all Coloradans.

We understand that health extends beyond the doctor's office and the hospital. To be completely healthy, people need access to healthy and nutritious foods, clean air, effective schools, safe parks and playgrounds. We're very intentional about improving the health and vitality of Colorado communities.

We impact thousands of lives each year through a wide range of programs, partnerships, and assistance to help those in our communities. For many years, we've worked collaboratively with community organizations to assess the community's health needs and resources.

B. Overview of Kaiser Permanente's Specialty Care Funding Opportunity

Kaiser Permanente Colorado will invest up to $1,000,000 over three (3) years to support up to four (4) grantees to increase/improve specialty care for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals). This funding opportunity is open to organizations that have identified access to specialty care as a prioritized need and have an established work group in place to work on the issue. Applicants are not required to have an existing, implemented specialty care program but must demonstrate planning for and/or progress toward implementation.

Grantees will work together as a cohort to identify and implement ways to increase connectivity and scalability of specialty care programs across organizations, service areas, and systems.

The two outcomes of this funding opportunity that applicants should address are:

- Work collaboratively with a cohort of grantees to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions
- Increase/improve access to specialty care for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals) through expansion of an existing program or implementation of a new program already in the planning stages

Successful applicants must address how their work to increase/improve specialty care access for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals) will connect with others working on the issue, including identifying processes for medical record documentation, communication, and care coordination within and across organizations. Grantees will work together as a cohort, convened by an external facilitator, to achieve the project outcomes.

C. Purpose of Kaiser Permanente's Specialty Care Funding Opportunity

In 2016, Kaiser Permanente Colorado conducted a [community health needs assessment (CHNA)](#) to inform its population health strategies. This research provided data about the community's health needs and resources. Access to specialty care was among the priority health needs. Access to specialty care is extremely limited for low-income patients who either have no insurance or rely solely on Medicaid as their payer source. A [statewide needs assessment](#) conducted in 2010 by the Colorado Health Institute, funded by us, confirmed this.

Medicaid and low-income uninsured patients face disproportionate difficulty in accessing specialty care and lengthy delays when they are able to be seen. This lack of specialty care access often results in early death, decreased quality of life, or decreased productivity in the workforce. Patients in rural areas face similar challenges, regardless of insurance status, because most specialists are concentrated within urban areas. While the presence of a primary care safety net can address some of the health needs of low-income or rural patients, specialty care is a vital part of an effective and efficient medical community. There simply is no specialty care safety net for many Coloradans.

In response to this need, Kaiser Permanente Colorado developed a Safety Net Specialty Care Program that allows select community primary care providers to electronically request advice (e-consult) for their low-income uninsured adult patients with nine Kaiser Permanente specialties. E-consults are medical requests for advice conducted electronically, using a secure messaging platform that facilitates communication between primary care clinicians and specialty care providers. In many cases, the ability to e-consult with a specialty care provider has been shown to be effective in eliminating the need for face-to-face care, thus streamlining care and decreasing backlog for patient in-person consults. [Our program](#) also provides face-to-face specialty care visits for community patients in some cases, and offers opportunities for medical education to safety net providers.

We are aware of several groups in Colorado that are working to improve specialty care access for underserved people. Starting small has worked well for the Kaiser Permanente Colorado Safety Net Specialty Care Program, and many others have taken our learnings as guidance for their own projects. Ultimately, however, we would like to be a part of a larger, sustainable system that seamlessly connects patients, providers, hospitals and other specialty care services, regardless of the insurance status, specialty care need, or geographic location of the patient.

This funding opportunity recognizes that many more partnerships with hospitals, health care Safety Nets, specialist groups, and others need to be forged to better meet the demand for specialty care services. This funding opportunity serves as a step toward creating a broader system to improve specialty care access across Colorado.

As part of the application process, applicants are required to explain how they could partner with other efforts, including Kaiser Permanente, to connect to a broader system of care, and how they will increase specialty care access at the local level.

2. Grant Guidelines

A. Funding Guidelines

We intend to fund up to four organizations for three years. Each applicant may submit only one proposal. Each applicant must also meet all the other eligibility requirements or the application will not be reviewed. Requested funding should support staff time and any additional expenses associated with participation in the cohort and expansion of an existing program or implementation of a new specialty care program already in the planning stages.

The following additional funding guidelines apply to applicants of this RFP:

- Organizations may apply for a total funding amount up to $300,000 (up to $100,000/year). Final award amounts will be negotiated with each grantee
- Applicants must include travel expenses at an amount of $2,500/year in the travel line item of their budget proposals to attend the cohort meetings
- Applicants that request more than 50 percent of salary and benefits for an individual FTE must articulate within their proposal and budget narrative if the position is a temporary position or if the organization plans to continue the position and/or work post-grant
- Applicants may not use grantfunding to hire, contract, or pay for specialists or for medical services
- Applicants are recommended to allocate a minimum of 10 percent of their overall budget request for evaluation efforts

Kaiser Permanente provides general guidance for organizations when developing the proposal budget and budget narrative. Click here for guidance information.

B. Eligibility

Eligible organizations must be a Colorado 501(c)(3) in good standing with the IRS. Fiscal agents are allowed; however, fiscal sponsorships are not permissible. Applications from a consortium of organizations are allowed; the consortium must identify a lead organization to serve as the applicant.

In addition, organizations must:

- have identified access to specialty care as a prioritized need
- have an established work group in place to address the issue
- provide dedicated staff to attend required grantee cohort meetings and contribute to the work of the cohort in between meetings
- demonstrate a willingness to collaborate with others to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions

Partnerships with Regional Care Collaborative Organizations and contracted entities under ACC 2.0, are encouraged, however, these entities are not eligible to apply. Organizations that are considering bidding to become a contracted entity under ACC 2.0 in 2018 are also discouraged from applying.

Organizations that are currently funded by Kaiser Permanente Colorado through a grant as of August 31, 2017 are not eligible to apply. Former Kaiser Permanente grantees must have completed all reporting requirements of previous grants.

Kaiser Permanente is not able to consider funding requests that support the following:

- Religious purposes
- Partisan political activities
- Athletic or sports activities
- International or social organizations
- Endowments or memorials
- Fraternal organizations
- Field trips or tours
- Individuals
- Bricks and mortar capital or capital improvement projects
- Activities or organizations associated with the use of alcohol or tobacco

Non-Discrimination Verification*.*
Kaiser Permanente has an unwavering commitment to equal access and opportunity for all persons. Organizations applying for funding will be required to attest that they do not discriminate on the basis of race, color, religious creed, national origin, age, sex, marital status, sexual orientation, gender identity, handicap, disability, medical condition, or veteran status either in their employment or their service policies and practices.

Conflict of Interest*.*
Kaiser Permanente asks each organization requesting a contribution to disclose any relationships with Kaiser Permanente that may be, or appear to be, a conflict of interest. Such relationships do not necessarily prohibit an organization from receiving a contribution, however, they must be disclosed.

Requirements of grantees, including participation in a cohort and evaluation expectations, are included in the following section.

3. Grantee Requirements

A. Participation in Grantee Cohort Meetings

We plan to support a cohort of grantees, and include Kaiser Permanente Colorado's Safety Net Specialty Care Program as one of the participants in the cohort (though none of the grantfunding will be used by Kaiser Permanente Colorado). We will partner with an external consultant to convene and facilitate required, regular meetings. Meetings may be more frequent during years one and two (up to monthly) during the planning phase and will likely be less often in year three during the implementation phase.

These meetings will provide:

- A venue for grantees and Kaiser Permanente to work collaboratively to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions
- Opportunities for the cohort to discuss and implement co-beneficial processes
- Focused opportunity for grantees and Kaiser Permanente to learn from one another
- Access to subject matter experts
- Access to additional technical assistance
- Connection to other community resources that may be relevant to the success of individual grantee programs and the cohort

Attendance by a minimum of one dedicated staff member from each grantee organization is **required** at these cohort meetings. Additional work in between meetings may need to occur to reach the grant outcomes. In addition to any travel expenses as part of the project, **applicants should include travel expenses at an amount of $2,500/year in the travel line item of their budget proposals to attend these meetings.** The final travel amount will be adjusted based on the geographic location of grantees.

B. Accountability Requirements

In addition to attendance, participation, and presentation at grantee meetings, each grantee will be required to:

- Sign and agree to the terms within the grant agreement
- Participate in evaluation requirements, including submission of quarterly data reports throughout the term of the grant (see evaluation requirements)
- Submit annual progress reports and a final report

Reporting Requirements.
Grantees will be required to submit reports throughout the term of the grant. Grant reports will be due on **March 29, 2019**, **March 31, 2020**, and a final report on **April 30, 2021**. Each report should include:

- Progress made toward stated goals and activities within the proposal and project plan
- Progress toward evaluating the impact of the grant
- Significant successes and challenges the organization experienced in implementation
- Lessons learned as result of successes and challenges and any changes or course correction that will be made based on the lessons learned
- A budget narrative that explains expenditures to date, variances over 20 percent from planned spending, and any anticipated changes to expenditures
- A budget template that shows expenditures to date compared to the approved budget for the grant

Evaluation Requirements.
Grantees will be required to collect and report data throughout the grant period. We recognize that organizations may not currently have the internal capacity to track and report data. We strongly encourage organizations to partner with other organizations that are currently tracking this type of data to assist them in setting up data collection systems or to provide this function for the applicants. Applicants that choose to partner with other organizations on data collection should describe this within their proposals, specifically citing the nature of this partnership and how the ability to track and report this data collection will take place over time. Letters of collaboration from the evaluation partner organizations should be included in the grant application and address how the applicant will collaborate with the partner organization(s). **Applicants should include evaluation expenses in their budget proposals to support the collection and reporting of data, including partnerships with other organizations**.

The RFP has two primary streams of work: (a) work collaboratively with a cohort of grantees to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions, and (b) expand/implement grantee's specialty care program to increase/improve access to specialty care for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals). The evaluation will reflect the work and process in each of these streams.

(1) With facilitation from a convener, grantees will collaborate to identify common outcomes to achieve the goal of connecting to one another. Once outcomes and processes have been established by the cohort, grantees will be responsible for tracking progress toward the desired outcome(s) using quantitative and qualitative methods. Strong applicants will demonstrate their willingness to collaborate and demonstrate their capacity for participating in evaluation (for example: strong leadership, organizational environment, adequate resources, external supports, evaluators with strong skills and knowledge, and a comprehensive organizational evaluation framework).

(2) Applicants should provide quarterly reports on data points that highlight the implementation of a new program or expansion of their current specialty care program. Within the grant application, applicants should describe how they are collecting the indicators below or how they are planning to collect them. Also, applicants should describe any additional indicators they currently collect or are planning to collect as part of their specialty care program *(baseline data required and reported quarterly thereafter):*

- Number of uninsured adults (18 years of age and older) receiving specialty care services reported by type of specialty and type of service (e-consult, in-person, etc.)

- Number of adults (18 years of age and older) on Medicaid receiving specialty care services reported by type of specialty and type of service (e-consult, in-person, etc.)

- List of participating specialty care providers, by specialty

- Number of participating specialty care providers, by specialty

- Response time (time it takes for a specialty care provider to respond to a primary care provider via an e-consult), when applicable

- Wait time (days from face-to-face visit appointment request until actual appointment), when applicable

- Rate of no shows (patients not showing up for their appointment)

C. Kaiser Permanente's Role and Resources

We view grantees as partners and will provide ongoing support to help ensure each grantee's success. As a partner, we will provide:

- Evaluation assistance
  - Provide a standardized template for grantee data reporting (the template will be refined with grantees based on the data collection indicators outlined in this RFP)
  - Provide technical assistance to collect and report data on the number of people receiving specialty care services
  - Refinement of project evaluation plans
- Standardized report form and format for submitting required progress reports
- Access to subject matter experts and community partners
- Collaboration to analyze data, prepare presentations and papers, and disseminate knowledge gained from the projects
- Assist with media and communications about the grant

4. Proposal Submission

A. Electronic Application Process

Phase 1: Letter of Intent.

Applicants must submit a Letter of Intent by June 16, 2017 using our online application process. **See Appendix A** for all information that must be included within the Letter of Intent.

Please review the tips on the main page of the online form before beginning a Letter of Intent. Follow these instructions:

1. [Click here](#) to access the instructions to submit a Letter of Intent

2. For new users, create a new account with an email address and password (or sign in using an existing email and password)

3. Complete the online application

4. Select review to preview the completed application

5. Select submit after reviewing the completed application

Only one account should be created per organization. If multiple individuals need to access this account, share the Account ID (email address) and password with those individuals.

Letters of Intent will be considered for review if submitted electronically by **June 16, 2017 at 5:00 p.m. MT**. Letters of Intent will not be accepted by fax, nor will the submission deadline be extended. Applicants that do not meet the deadline will be considered non-responsive and will not be entered into the review process. Once the Letter of Intent is submitted into the online grant application system the system does not allow the applicant to make changes or edits. It is recommended that applicants allow enough time to account for any potential technical issues and submit before the deadline.

Phase 2: Full Proposal.

Applicants will be notified via email by **July 14, 2017** if they are invited to submit a full proposal. Applicants must receive an invitation to submit a full proposal. Full proposals must be submitted using our online application process by **August 31, 2017**. Emailed, mailed, or faxed letters will not be accepted nor entered into the review process. **See Appendix B** for information that must be included in the full proposal.

Phase 3: In-Person Interview.

At the discretion of the selection committee, applicants may be asked to participate in an in-person, follow-up interview as part of the application process. Interviews will take place in September.

B. Proposal Review Process

1) Letters of Intent will be reviewed and evaluated by a panel convened by Kaiser Permanente Colorado staff. Each letter of intent will be scored and ranked based on the weights within the Letter of Intent guidance document. **Applicants will be notified via email by July 14, 2017 if they are invited to submit a full proposal.** Instructions on how to submit a full proposal will be included in the notification email.

2) **Full proposals are due August 31, 2017.** Full proposals will receive two reviews: during the first review, each application will be scored and ranked based on the weights within the Project Narrative Guidance document; during the second review the top applications will be reviewed as a group to ensure alignment with the objectives and outcomes of the RFP, geographic and population diversity, and a balanced cohort of grantees.

3) Applicants may be asked to participate in an in-person interview as part of the application process. **If needed, in-person interviews will take place in September.** The purpose of the interview is for the applicant to demonstrate its level of readiness to engage in the project, in addition to expanding on what is written in the full proposal and will be held at the discretion of Kaiser Permanente. Applicants asked to participate in an interview will be encouraged to invite key partners and stakeholders. Interviewer comments will weigh into the final selection process.

4) Applicants will be notified via email of final funding decisions by **December 8, 2017.**

C. Technical Support

Technical assistance questions regarding the electronic application submission can be emailed to: co-contributions@kp.org.

5. Appendix

The following appendices are provided:

- Letter of Intent Application Questions
- Full Proposal Application Questions

![Kaiser Permanente logo]

Appendix A: Letter of Intent Application - Required Information and Questions

Applicants that submit a Letter of Intent should provide the information below. The online application includes both questions that applicants must complete within our online system as well as required documents that are uploaded.

Organization Information

1. Tax Status Information
   - Organization's Legal Name
   - Organization's Tax ID #
   - Organization's Name
   - Organization's Year Founded
2. Organization's Mailing Address
3. Organization's Fiscal Sponsor/Agent Information (if applicable)
4. Organization's Lead Contact Information
5. Project Contact Information (may be same as lead contact)

Conflict of Interest and Nondiscrimination

1. Do any Kaiser Permanente executives, managers, directors, physicians, or other employees or their family members:
   - Serve as a board member, director, officer, manager, employee or fiduciary agent of the organization;
   - Have a compensation arrangement or financial interest with the organization; or
   - Hold any position of substantial influence with respect to the organization?

2. Does a Member of Congress, Executive Branch Official, State Official, or their staff:
   - Serve as a board member, director, officer, manager, employee or fiduciary agent of the organization; or
   - Have a compensation arrangement or financial interest with the organization; or
   - Hold any position of substantial influence with respect to the organization?

3. Would any portion of this contribution be used to honor or recognize the achievements of a Member of Congress, Executive Branch Official, State Official, or their staff?

4. Does the organization have a political action committee (PAC) or committee on political education (COPE)?

5. The organization applying for a contribution does not discriminate on the basis of sex, age, economic status, educational background, race, color, ancestry, national origin, sexual orientation, gender identity, marital status, physical or mental disability in their programs, services, policies, hiring practices, and administration. Additionally, the organization affirms that it is not affiliated with or actively involved with terrorist activities. Does the organization comply with the statement above?

6. For a religious or faith-based organization, would the proceeds be used to support general operations, services and programs of the congregation/membership/students, or to advance religious doctrine or philosophy?

[Letter of Intent](#) Questions

The Letter of Intent must be **1,250 words or less** (double-spaced, Times New Roman,12 pt font) and address the following sections:

Name of Applying Organization (not included in word count)

1. Specialty Care Program (20 points, 250 words or less)
Briefly describe your current specialty care program, including number and type of specialty care providers participating, general referral process, and number of patients the program has served and in what time period. If you do not have a current specialty care program, please describe where you are in the development process and key elements of your planned program. Include detail on how this funding opportunity could support implementation and/or expansion of your current specialty care program.

2. Barrier to Specialty Care Access (25 points, 250 words or less)
Briefly describe what you see as the primary barrier to improving specialty care access in your current/planned program, including why you feel this is a barrier, and what you see as potential solutions to address the barrier.

3. Work Group Structure (15 points, 250 words or less)
Briefly describe the structure of your work group. Include how long this group has been in existence, significant partners, and their roles.

4. Cohort Participation (15 points, 250 words or less)
Briefly describe how participating in a cohort of organizations working to improve specialty care access will be helpful, and what you hope to achieve by doing so. What unique skills, strengths, and experience will you contribute to the cohort?

5. Barrier to Collaboration (25 points, 250 words or less)

Briefly describe what you see as the biggest barrier to working collaboratively with a cohort of grantees to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions.

Required Attachments

1. IRS Determination Letter showing nonprofit status of the organization
2. Board of Directors List
   - Please note that the organizational affiliation and term start date and end date of each Director is required
3. IRS 990 Form
   - If the 2016 form has not yet been filed, the organization may substitute the 2015 form
4. Letter of Intent
5. Fiscal Agent Agreement (only required if applicable)

Appendix B: Full Proposal Application - Required Information and Questions

Applicants that are invited to submit full proposals will be asked to provide the information below. The online application includes both questions that applicants must complete within the online system as well as required documents that are uploaded, including the project narrative.

Project Demographics and Kaiser Permanente Involvement
1. Proposal Funding Amount Requested
2. Total Project Budget
3. Organization Annual Operating Budget
4. Anticipated Direct Reach
5. Anticipated Indirect Reach
6. Age Group Served (drop-down menu)
7. Ethnicity/Ethnicities Served (drop-down menu)
8. County/Counties Served (drop-down menu)
9. What visibility would Kaiser Permanente receive from the organization as a result of funding this proposal?
10. Include the name and title of Kaiser Permanente employees or business units engaged with the organization or project, and how they are engaged

Required Attachment
1. 2015 and 2016 Independently Audited Financial Statements
   - Organizations that have not completed an audit for their 2015 and/or 2016 financials may choose to submit their internally prepared balance sheet and income statement for the two most recent **closed** fiscal years, in addition to their most recently completed audited financial statements
2. 2017 Organization Operating Budget
3. 2017 Year-to-Date Internally Prepared Balance Sheet
4. 2017 Year-to-Date Internally Prepared Income Statement
5. Project Narrative (questions provided by Kaiser Permanente)
6. Project Budget (template provided by Kaiser Permanente)
7. Project Budget Narrative (guidance provided by Kaiser Permanente)
8. *Optional:* Letters of Collaboration (as applicable to the project/program)

Project Narrative (Full Proposal) Questions

Applicants should complete the following questions in a word document and upload the document to their application. The project narrative should be no more than 3,500 words, double-spaced using Times New Roman 12 point font with one inch margins on all four sides of the pages.

1. **Executive Summary** (not included in word count)

Provide an executive summary of the project/program being proposed. The executive summary should provide a clear summary overview of the project, including:

- Local data supporting the need for increased/improved specialty care services
- Amount the organization is requesting and an overview of how the funds will be used
- Commitment to work collaboratively with a cohort of grantees to develop and pilot a process for communication and referral across organizations, service areas, and systems that includes virtual and technological solutions
- Number of adults,18 years of age and older, who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals) in the organization/consortium's service area
- The expected number of people served (include a baseline of current number of people served if the proposal is to expand an existing project/program)

2. **Organizational Background** (500 words or less, 10 points)

Provide information about the organization that will help the review committee better understand how the applicant is suited for the proposed project, including:

- The organization's mission
- The year founded, history and purpose of the organization
- Significant recent accomplishments, awards, and/or recognition
- The organization's current goals and programs
- Why the organization is best suited to respond to this RFP
- Staff size and expertise; the nature and scope of their work and capabilities
- Other information that would help us to assess the organization's infrastructure and capacity to implement the proposed project/program

3. **Approach** (2,000 words or less, total of 70 points as follows)

- **Problem Statement** (5 points)
  Provide relevant background information that includes local data regarding the state of specialty care services currently available for adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals). Specify the highest specialty care needs and demands in the organization's/consortium's service area and how these needs were identified.

- **Participation in the Cohort** (25 points)
  A successful cohort will collaboratively achieve the outcomes stated in this RFP. Describe characteristics of the cohort that will be necessary to achieve these outcomes. Responses may include but are not limited to logistics, participants, facilitation style, collective values, communication, engagement and other information. Please include examples of successful cohorts in which you've participated.

  Describe what participation in the cohort would look like for your organization. Responses should include but are not limited to: logistics such as dedicated staff(s) time, role and responsibility of staff(s) participating in the cohort, organizational participation such as engagement of leadership and work group. Address your organization's willingness to adopt new practices that are identified by the cohort as preferred practices.

- **Specialty Care Program Expansion/Implementation** (25 points)
  Describe how your current or planned specialty care program will address the elements listed below over the three-year grant period. Include **expected outcomes** at the end of the grant period and **activities and strategies** for achieving the outcomes.

  - **Work Group:** Provide evidence that the organization's work group charged with increasing/improving specialty care access to underserved populations is established (e.g., letters of support from partners, organizational documents). Include how long the group has been established and briefly describe the role/responsibility of significant members of the group. Expand on what you provided in your Letter of Intent and include anticipated outcomes.

  - **Target Populations:** Describe how the organization reaches or plans to reach adults 18 years of age and older who receive Medicaid assistance and/or are low-income uninsured (including undocumented individuals) in the organization's service area.

  - **Specialty Care Providers:** Describe how the organization recruits or plans to recruit and retain specialty care providers.

  - **Wrap-around Services:** Describe how the organization provides or plans to provide transportation, patient navigation, interpretation, pharmaceuticals, durable medical equipment, laboratory, imaging, and other services that may accompany face-to-face care.

  - **Partnerships:** Describe how the organization partners or plans to partner with local hospitals or other organizations.

- **Connecting the Work** (15 points)

  Describe, using concrete examples, how the work of the cohort and the development of your specialty care program will complement each other.

4. **Applicant Evaluation and Performance Measurement:** (1,000 words or less, 20 points)

Evaluation and performance measurement help demonstrate achievement of project/program outcomes, build a stronger evidence base for specific project/program strategies, clarify applicability of the evidence base to different populations, and inform project/program improvement.

- **Evaluation Approach:** Describe the organization's approach to evaluation and how impact of the proposed project/program will be measured.

- **Evaluation Capacity:** Describe your organization's evaluation capacity and capabilities that may include comments on the following themes: leadership; resources, including staff, technology and data collection programs; external supports; and organizational evaluation framework.

- **Evaluation Findings:** Describe how evaluation findings are/will be used for continuous project/program improvement.

- **Collection of Data:** Describe how the indicators and required data outlined in the RFP (section 3B *Evaluation Requirements item 2)* are currently being collected or will be collected. Applicants that are collecting additional indicators as part of their specialty care program should provide detail on how these indicators are collected and used.

- **Anticipated Barriers:** Identify any anticipated barriers in collecting and analyzing project/program data.