

Healthcare Georgia Foundation
grantmaking for health



Expanding Access to Primary Health Care: Safety Net Funding for Free and Charitable Clinics

Request for Proposals

Pre-Application Webinar

October 28, 2010 (9:30 am – 11 am)

Registration Link:

http://www.regonline.com/HGF_SafetyNetRFP

Evaluation Training Webinar

November 5, 2010 (1 pm – 2 pm)

Registration Link:

http://www.regonline.com/HGF_SafetyNetRFPEvaluation

Online Proposal Deadline

December 9, 2010

The Hurt Building ■ 50 Hurt Plaza, Suite 1100 ■ Atlanta, GA 30303
404-653-0990 ph ■ 404-577-8386 fax ■ www.healthcaregeorgia.org

Request for Proposals

Expanding Access to Primary Health Care: Safety Net Request for Proposals for Free and Charitable Clinics

Rationale/Background

The mission of Healthcare Georgia Foundation is to advance the health of all Georgians and to *expand access to affordable, quality health care for underserved individuals and communities*. Free and charitable clinics are an important component of the safety net for uninsured and underserved individuals in Georgia, particularly in rural communities. The National Association of Free Clinics defines free clinics as “volunteer-based, safety-net health care organizations that provide a range of medical, dental, pharmacy, and/or behavioral health services to economically disadvantaged individuals who are predominately uninsured.” This definition includes entities that charge a nominal fee to patients, provided essential services are delivered regardless of the patient's ability to pay.

According to the Georgia Free Clinic Network, Georgia’s free and charitable clinics delivered health services to approximately 175,000 low-income, uninsured Georgians in 2008. Eighty percent of free clinic patients have one or more chronic illnesses, requiring extensive and ongoing medical care, care coordination and patient education. The average clinic in Georgia serves a diverse patient population: 40 percent Caucasian, 41 percent African-American and 16 percent Hispanic/Latino. Fifty-seven percent of clinic patients are female, and 85 percent are between ages 18 and 64. Clinics serve as an alternative to patients inappropriately accessing care in emergency rooms. In some communities, particularly rural areas where there may be limited resources, clinics are the only viable option for primary care for the uninsured.

In December 2007 and June 2008, the Foundation provided funding to free and charitable clinics through two rounds of safety net grants. The Foundation’s grants totaled \$1.3 million to 16 organizations statewide to build clinics’ capacity to provide health services for medically underserved Georgians, as well as to improve health care quality and to assess health outcomes associated with clinic services. Grantees provided primary and preventive care to thousands of uninsured Georgians. Healthcare Georgia Foundation’s interest in building the capacity of free clinics is consistent with its mission and with its funding priority of Expanding Access to Primary Health Care.

The goal of the recently passed Patient Protection and Affordable Care Act (PPACA) is to expand access to health insurance by developing comprehensive health insurance reforms that will hold insurance companies more accountable, lower health care costs, guarantee more health care choices and enhance the quality of health care for all Americans. Many of the major components of the law that are meant to expand access to health insurance will not be fully implemented until 2014. After full implementation, there will still be a fraction of uninsured Georgians. Until 2014 and even beyond, safety net organizations will be essential in providing health care to the uninsured. Safety net providers also will need to improve access to care

through coordinated delivery systems and ensure that patients' needs are met beyond the scope of primary care.

Healthcare Georgia Foundation announces its interest in receiving proposals from nonprofit health organizations that provide health services to uninsured and underinsured Georgians at little or no cost and rely substantially on volunteer health care professionals to provide these services. The Foundation's intent with this funding opportunity is to build upon prior funding efforts to ensure that clinics can appropriately respond to the growing volume of patients seen as a result of the downturn in the economy, address gaps to individuals accessing quality health care, and assist clinics to move toward becoming a consistent source of health care (medical home) for individuals in their communities.

Purpose/Goal Statement

The purpose of the Foundation's Safety Net funding strategy for 2011 is: 1) to provide grants directly to clinics for direct service provision in order to expand primary and preventive care to uninsured Georgians, and 2) to strengthen clinics' organizational and evaluation capacity to create sustainable and viable organizations.

The Foundation's goal is to assist clinics to accomplish the following:

- Improve the structure, delivery and financing of health care services;
- Implement approaches to expand access to health care and improve the quality and/or efficiency of services provided;
- Implement best practice approaches to become a consistent source of care for patients (medical home);
- Develop and strengthen partnerships to coordinate services with other providers (i.e. specialty providers, dental, pharmaceutical); and
- Build organizational capacity and evaluation expertise through training and technical assistance.

Program Scope

In 2010, applicants applying to the *Expanding Access to Primary Health Care: Safety Net Request for Proposals for Free and Charitable Clinics* may apply for **up to \$40,000 for 12-18 months. The Foundation anticipates awarding approximately 10-15 grants; however, the final amount and number of grant awards will be based on the number of applications received and/or the availability of Foundation funds.**

Direct Service Provision

Through this funding announcement, the Foundation is seeking proposals from Georgia-based nonprofit health organizations serving as free and charitable clinics that provide primary care services to underserved populations primarily through volunteer health care professionals. Applicants should address one or more of the Foundation's goals listed above.

The following are examples of program strategies that will be considered. The Foundation is interested in supporting clinics that are:

- Implementing best practice programs to become a medical home for patients (i.e., tracking patient satisfaction and compliance, making appropriate referrals for services other than primary care);
- Implementing practices/procedures to enhance the quality of health care services delivered;
- Creating a system for appropriate follow-up and care coordination;
- Expand clinic workforce (staff and/or volunteers) to accommodate existing patients and/or increase the number of patients served;
- Expanding the hours of operation/ and or the number of clinic days to serve new patients or better accommodate existing patients;
- Improving efficiencies (i.e. decrease waiting times, implement electronic medical records);
- Implementing or expanding preventive and wellness services to manage chronic diseases (e.g. managing diabetes and offering smoking cessation classes);
- Providing training for board, staff and/or volunteers;
- Creating new or revising organizational and financial procedures to enhance clinic operations.

Strengthening Organizational and Evaluation Capacity

All applicants are expected to submit proposals that include specific and measurable outcomes for their programs. Applicants must demonstrate the capacity to collect baseline and interval data for process and outcome measures specific to the proposed interventions related to their program design and outcomes. Grantees are expected to meet reporting requirements for the duration of the grant period, including the submission of semi-annual progress and final narrative and financial reports, and participation in Foundation site visits.

The Foundation is dedicated to strengthening the clinic grantees' organizational and evaluation capacity to assist them in evaluating patient outcomes and developing plans to sustain their clinics in order to demonstrate the clinic's value to the community. To accomplish this, the Foundation has engaged the Center for Community Health and Evaluation (CCHE) to provide pre-award evaluation technical assistance. The pre-award technical assistance will consist of an evaluation Webinar for potential applicants, assistance to applicants in developing their evaluation plans prior to submitting their proposals, and feedback and recommendations to Foundation staff based on the plans submitted. The evaluation Webinar will be available to all interested applicants. Participation is not required to receive funding, but it is highly encouraged.

The Foundation also plans to provide organizational capacity building and technical assistance services (i.e. strategic planning, organizational assessments, board and staff development, and preparation for health reform implementation) through the Georgia Free Clinic Network, and evaluation technical assistance through CCHE. The Foundation will fund these activities through separate grants; however, applicants should commit **up to 10% of the subtotal of direct expenses** to support the evaluation activities required of grantees.

At a minimum, each grantee is expected to develop strategies that will result in the following outcomes:

1. Increase the number of unduplicated patients served and total number of patient visits;
2. Improve organizational structure, delivery and financing of health care services;
3. Improve the organization's collaboration and partnership efforts with community-based organizations; and
4. Track patient outcomes. For example, track patient satisfaction, compliance, health outcomes (i.e. percentage of patients that lowered their blood pressure, cholesterol, HbA1c levels).

In addition, each grantee is expected to develop indicators for each objective and include an evaluation plan that details plans to assess progress and success.

❖GUIDELINES FOR PROPOSALS❖

The Healthcare Georgia Foundation is an independent, private foundation created in 1999. The mission of the Foundation is to advance the health of all Georgians and to *expand access to affordable, quality health care for underserved individuals and communities*. The purpose of this document is to help you prepare a proposal that will enhance your chances of successfully receiving a grant.

Given our commitment to traditionally underserved populations, the Foundation encourages cultural diversity, representativeness and inclusiveness in the boards, staff and individuals served by the organizations we fund. This principle is shaped by the conviction that all segments of society benefit from pluralism and equal opportunity.

Eligibility

For this RFP, Healthcare Georgia Foundation will only consider clinics located in Georgia, and the program service area should be within Georgia. The Foundation will not consider requests to use funds to support fundraising activities, capital campaigns or biomedical research. The following guidelines apply:

- Applicants must serve uninsured and underinsured populations and provide primary care services primarily through volunteers.
- The applicant must be tax exempt under section 501(c)(3) of the Internal Revenue Code and are defined as “not a private foundation” under Section 509(a).
- Organizations that are not a 501(c)(3) entity can apply through a tax-exempt organization acting as a fiscal sponsor.
- The Foundation does not generally make grants for activities that exclusively benefit the members of sectarian or religious organizations.
- The program service area should be located within the state of Georgia.
- Organizations designated as federally qualified health centers are not eligible to apply to this RFP.
- Organizations that have an active Foundation grant at the time of application are not eligible to apply to this RFP.
- Applicants may only apply to one Healthcare Georgia Foundation RFP in 2010.

Priority Areas for Funding

The applicant organization should consider the funding request with respect to the Foundation’s mission -- to *advance the health of all Georgians and to expand access to affordable, quality healthcare for underserved individuals and communities*. Within this broad, statewide focus, the specific goals of the Foundation are:

- *To protect and promote the health of individuals, families, and communities;*
- *To improve the availability, quality, appropriateness and financing of health care services; and*
- *To integrate and coordinate efforts to improve health and health care services.*

Expanding Access to Primary Health Care

This RFP is a fit with the Foundation's Expanding Access to Primary Health Care funding priority area. Primary care is the provision of integrated, accessible health services by clinicians responsible for addressing a large majority of personal health care needs, developing sustained partnerships with patients and practicing in the context of family and community. A primary care provider provides patients with a medical home and place to receive a range of health services and supports. It is the primary care provider that guides patients through the health care delivery system and facilitates patient participation in decisions about their health and health care. They create opportunities for disease prevention and health promotion as well as build bridges between personal health care delivery and patients' families and communities. The six indicators of quality primary care include services and supports that are accessible, acceptable, accountable, comprehensive, coordinated and continuous. Unequal access, treatment and outcomes are symptomatic of an inadequate system of primary care. It is known that health disparities exist among populations defined by age, gender, economic, demographic, race, ethnicity and disability status. Through strategic grantmaking, Healthcare Georgia Foundation can improve access to primary health care services by Georgia's uninsured and underinsured population. In an effort to provide comprehensive, integrated and seamless system of health services, the Foundation's technical and fiscal resources could support applied research/practice-based and intervention research, workforce development (pre-service or in-service), leadership development and recognition, health policy analysis and advocacy, organizational improvement and the provision of preventative health services.

Instructions for Submitting a Proposal

The proposal guidelines provide instruction with respect to the application process, funding criteria and application deadlines. The following guidelines are intended to help organizations prepare technically sound and complete proposals. The submission of a proposal does not indicate that your proposal will be reviewed favorably once it is received or that it will be approved by the Foundation's Board of Directors.

Applicants are required to apply online at the Foundation's Website at www.healthcaregeorgia.org by **December 9, 2010**. The on-line application will be available after October 18, 2010. Proposals will not be accepted via email, and late proposals will not be considered.

Applicants may apply for **up to \$40,000 for a period of 12–18 months. The Foundation anticipates awarding approximately 10-15 grants; however, the amount of grant awards will be based on the number of applications that are received and/or the availability of Foundation funds.**

I. Application Process

Applications must be submitted online by **December 9, 2010**. The Foundation will conduct a pre-application webinar on **October 28, 2010 from 9:30 a.m. – 11 a.m.** to clarify and answer RFP-related questions. An evaluation training Webinar will be conducted on **November 5, 2010 from 1 p.m. – 2 p.m.**

II. Preparing your Proposal Narrative

Follow the Proposal Narrative requirements by typing the corresponding headings that reflect each lettered section. Include the proposal narrative document as an attachment to the online application. **Sections A & B (Abstract and Organizational Background) should be completed using the fields on the online application form.** Include the responses from Sections C-H as an attached document. Your proposal narrative, excluding attachment and budget forms should be no more than eight (8) single-spaced pages with one-inch margins and no less than an 11-point font size.

- A. Abstract.** Include a summary of the proposal (1-2 paragraphs). Please state the mission of the submitting organization, the total dollar amount requested rounded to the nearest thousandth, and the time period proposed for the grant. Briefly describe the proposed project. The summary should also describe the target population and geographic area to be served.

B. Organizational Background. Briefly describe your organization and include the following:

1. Mission Statement and/or Guiding Principles.
2. Brief summary of organization (include year established and current year's operating budget)
3. How many days is the clinic open per week? What are the clinic's hours of operation?
4. Detail the type of services provided (e.g. primary care, wellness and health education classes, eye exams, referrals). Describe any accomplishments of the clinic.
5. Describe the clinic's eligibility process and requirements and fees charged for services, if any (include first-time visit fees).
6. Describe if the clinic uses an electronic medical records system to capture patient data. If so, what data does the clinic collect?
7. Has the clinic developed a strategic plan or undergone an organizational assessment? If so, when and what were the results?

C. Program Description/Scope of Work

1. Provide a brief summary of the program/project for which you are seeking funds.
2. Describe how your proposed program/project fits with the Foundation's mission and goals, as well as the goals of this RFP.
3. Identify the geographic area served by clinic. This should include the county, city and local community.
4. Provide specific data that describes your target population (e.g. race, income, insurance status, age and gender). Identify the impact your services will have on the target population and surrounding communities.
5. Include the number of individuals that will be served or directly affected (include projected number of unduplicated individuals served as well as total number of patient visits).
6. Describe what steps, if any, the clinic has taken to provide a medical home for patients (consistent source of care). For example, do you have follow-up procedures in place, a database that tracks patients' outcomes, and/or regularly monitor patient compliance, etc.?
7. Describe the current availability of services (if any) in the community. Describe any barriers that exist to accessing primary care services (e.g. transportation, health care professional shortages, etc.). Explain how the clinic fills a gap in the community.

- D. Grant Outcomes.** Each grantee must measure four required outcomes for the population it serves (See below). Applicants may also include 1-3 additional grant outcomes that are specific to the target population. Outcomes should be measurable and answer the questions (who, what, when and how much). For specific examples of outcomes, refer to **Attachment A**.

At a minimum, each grantee is expected to develop strategies that will result in the following outcomes:

1. Increase the number of unduplicated patients served and total number of patient visits.
2. Improve organizational structure, delivery, and financing of health care services.
3. Improve the organization's collaboration and partnership efforts with community-based organizations.
4. Track patient outcomes. For example, track patient satisfaction, compliance, health outcomes (i.e. % of patients that lowered their blood pressure, cholesterol, HbA1c levels).

In addition, each grantee is expected to develop indicators for each outcome and include an evaluation plan that details plans to assess progress and success.

- E. Evaluation Plan.** The Foundation has engaged the Center for Community Health and Evaluation (CCHE) to work with safety net applicants in the development of their evaluation plans during the application process. CCHE staff will provide an evaluation Webinar for potential applicants. Also, evaluation sections of submitted proposals will be reviewed by CCHE. **Please be sure to include the following in the evaluation section of the proposal narrative:**

1. At minimum, you are expected to provide process data (e.g., unduplicated client numbers, units of service).
2. What other evidence will you be able to provide of progress made toward achieving your intended outcomes?
3. Identify who will be responsible for conducting the evaluation.
4. Describe the clinic's current evaluation plans and activities. What data do you collect? How often? To whom do you report these data?
5. Include a brief summary of any evaluation that has recently been conducted of this program or other aspects of your clinic's operations.

F. Program Management

1. Describe your plans for program oversight and execution. This should include: identification of a program/project director who will be responsible for management and reporting to the Foundation.
2. List any current and potential partners you work with to implement services (e.g. specialty care, pharmaceutical, dental provider), including their roles and responsibilities.

G. Program Sustainability

1. Describe any current state and/or federal funding sources.
2. Describe any other funding sources. Include potential funding sources from applications submitted.
3. Describe strategies used to maintain or increase organizational revenue.
4. List any in-kind services for the proposed program/project and assign a dollar amount to those services.
5. Describe plans to sustain the clinic; including efforts to sustain the outcomes.

H. Financial Request. A line-item budget and justification should be provided as an attachment.

1. Clearly state your request for funding; this should include a total dollar amount requested, including direct costs (round to the nearest thousand). Include the time period (not to exceed 18 months).
2. Describe how Foundation funds will be used. Explain how the request will help achieve the intended outcomes?

III. Allowable Costs and Activities

The following line items can be requested:

- Salaries and benefits of key staff
- Related small equipment, software and project specific medical supplies
- Costs related to implementing electronic medical records
- Evaluation (up to 10% of total direct costs)
- Indirect expenses (no more than 10% of total direct costs)

IV. Review Criteria

Priority will be given to proposals that meet the following criteria:

- The clinic targets an underserved minority and/or rural population.
- The clinic has a strategy in place to serve as a medical home for patients.
- The evaluation strategy will measure the expected program outcomes and objectives and staff has been identified to oversee the evaluation process.
- The clinic has a strategic plan or is working towards developing a strategic plan and has plans to sustain clinic operations.
- The clinic has electronic medical records to obtain patient data and track outcomes.
- The clinic has diversified funding sources.

V. Attachments

Attachments to the proposal must include the following:

- A. **Project Budget:** A line-item budget using the attached format and the following categories: personnel (salary and fringe benefits); operating expenses (rent, utilities, supplies, travel, etc.); and other costs (equipment, subcontracts/consultants, capital improvements). Provide a justification for each item. If you are requesting funding for only a portion of the project, a budget for the entire project that details all funding sources should be included separately, as well as the line-item budget for the request to the Foundation, rounded to the nearest thousand.

Special Note--Indirect Cost Policy: It is the policy of The Healthcare Georgia Foundation that administrative overhead or indirect costs are not to exceed 10 percent of total direct costs. The following items must be omitted from the total direct costs on which the indirect cost calculation is based: subcontracting arrangements, capital improvements (including renovation and purchases) and equipment purchase. The indirect costs must be listed separately in the budget as one line item and identified as administrative overhead or indirect costs. Narrative justifications of all budget line items are required, and the calculations for indirect costs and other overhead expenses will be thoroughly reviewed by Foundation staff for accuracy and applicability to the project.

- B. **Financial Documents:** Include a copy of your organization's current fiscal year operating budget, including revenue projections. You may be requested to submit a copy of the most recent audit completed for your organization. Foundation staff will notify you if additional financial documents are needed.
- C. **Letters of Agreement:** A maximum of three Letters of Agreement or Memoranda-of-Understanding for any agency, organization, consultant, or community member to be involved in the execution of the grant. A sample MOU is shown in **Attachment B**.

VI. RFP Timetable

October 28, 2010	Pre-Application Webinar (9:30 a.m. -11 a.m.) Please register using the following link: http://www.regonline.com/HGF_SafetyNetRFP
November 5, 2010	Evaluation Training Webinar (1:00 p.m. -2 p.m.) Please register using the following link: http://www.regonline.com/HGF_SafetyNetRFPEvaluation
December 9, 2010	Deadline for Online Applications
April 2011	Grant Awards Announced
May 2011	Grant Period Begins

VII. Proposal Review Process

Completed proposals must be submitted online to the Foundation website at www.healthcaregeorgia.org by **December 9, 2010**. Proposals will not be accepted via email and late proposals will not be considered.

Foundation staff will utilize an external review committee to review submitted applications. The Center for Community Health and Evaluation staff will also provide recommendations to staff regarding applicants' proposed evaluation strategies and performance measures.

If you have any questions regarding this RFP, please call or email Andrea Young Kellum, Program Officer, at 404-653-0990 or akellum@healthcaregeorgia.org. Questions about using the online application program (logging into the system, attaching documents, password help, etc.) should be directed to Symone McClain, Director of Grants Management, at smccclain@healthcaregeorgia.org.

Attachment A

SAMPLE OUTCOMES AND FORMAT

Outcomes are specific indicators of program goals. They define the necessary steps for reaching a goal. An objective must be measurable so that it is possible to determine to what extent the objective has been met. As indicated on Page 2 of the Guidelines for Proposals, please include no more than 3 outcome objectives you plan to accomplish during the grant period. Objectives should answer the following questions:

- *What* measurable change or benefit is expected?
- *Who* is expected to change or benefit?
- *How much* change or benefit is expected?
- *When* is change or benefit expected to happen?

EXAMPLES

Project Outcomes:

- Within 12 months *{when}*, increase the number of patients *{who}* who are provided with primary care and preventive services *{what}* from a baseline of 300 to 400 *{how much}*.
- Reduce patient waiting time *{what}* for patients *{who}* from a baseline of 20 minutes to 10 minutes *{how much}*, by the end of the grant period *{when}*.
- 80% *{how much}* of all clinic patients *{who}* will be transitioned to electronic medical records *{what}* within 12 months of grant award *{when}*.
- Develop and implement clinic data collection standards and processes *{what}* for 100 percent *{how much}* of clinic patients *{who}* within 18 months after the grant is awarded *{when}*.
- Have a strategic and evaluation plan *{what}* 100 percent completed *{how much}* for the clinic *{who}* within 6 months of grant award *{when}*.

ATTACHMENT B
SAMPLE MEMORANDUM OF UNDERSTANDING

MEMORANDUM OF UNDERSTANDING

Between

(Insert name of Applicant Organization)
("Hereinafter referred to as Applicant Organization")

And

(Insert name of Partner Organization)
("Hereinafter referred to as Partner Organization")

Applicant Organization agrees to:

- A.
- B.

Partner Organization agrees to:

- A.
- B.

(Insert Authorized Signature Name)
(Applicant Organization)

(Insert Authorized Signature Name)
(Partner Organization)

Date

Date