

## **Request for Proposals (RFP)**

### **Integrating Community-Based Organizations with Health Care Providers**

The Connecticut Health Foundation (CT Health) is the state’s largest independent health philanthropy dedicated to improving lives by changing health systems. Since establishment in 1999, the foundation has supported innovative grantmaking, public policy research, technical assistance, and convening to achieve its mission – to improve the health of the people of Connecticut. Over the past 20 years, **CT Health has awarded grants totaling more than \$62,000,000** in 45 cities and towns throughout the state.

In 2013, CT Health announced a strategic shift that made expanding health equity its central focus. For CT Health, health equity means *everyone has the opportunity to be as healthy as possible regardless of race or ethnicity*. To make this a reality, CT Health focuses on four areas that are critical to ensuring that the next generation will not face the same persistent racial and ethnic health disparities as their parents: ensuring access to care, increasing connection to care, improving care delivery, and linking clinical care with community organizations.

**This RFP focuses on providing seed funding and technical support to advance the creation of sustainable systems that integrate services among clinical care providers and community-based organizations (CBOs) in up to two Connecticut communities with significant populations of color. The goal will be for these new systems to address multiple factors and inequities that influence people’s health in a more seamless, holistic manner.**

Most of what influences people’s health happens outside the doctor’s office. Factors such as access to stable, affordable, and quality housing; healthy food; reliable transportation; quality education; and people to turn to for help make an enormous difference in a person’s ability to stay healthy. This is especially true for people of color in Connecticut who experience significant health disparities and inequities. For example, black and Latinx residents experience diabetes, high blood pressure, and obesity at 3 percent to 15 percent higher rates than the overall Connecticut population<sup>1</sup> and have higher rates of inpatient hospital discharges for coronary heart disease and heart failure.<sup>2</sup>

Due to an emerging shift from paying health care providers for the volume of services they provide to the value of what they do, there is a heightened interest among health care providers to identify ways to address social determinants of health and health inequity. This is because social determinants of health and health inequity contribute greatly to health outcomes and costs, which are at the heart of new value-based payment models. CBOs in communities across CT offer services that address social determinants of health and health inequity that could help clinical partners succeed under value-based payment. CT Health will provide seed funds and technical assistance to support the adoption of these integrated clinical-community systems in up to two Connecticut communities.

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<sup>1</sup> CT DPH, BRFSS 2015

<sup>2</sup> Connecticut Hospital Inpatient Discharge Database, 2014

## RFP Grant Program Details

### Goal

CT Health seeks to support integration among clinical care providers and community-based organizations in up to two Connecticut communities. CT Health will provide seed funding and technical assistance to groups of at least three CBOs in each community. The funds and assistance will support their readiness to pursue integration strategies and then implement integration strategies with at least one clinical partner in their community.

### Specific Objectives

The project should address the following issues:

- Develop integrated systems that address social determinants of health and health inequities, especially for populations of color.
- Develop and implement formal integration strategies among at least three CBOs and at least one provider, documented through formal agreements
- Develop systems to support integrated care, communications, and relevant, HIPPA-compliant data and information sharing among CBOs and providers
- Improve health outcomes for patients and reduce health disparities, particularly for populations of color
- Quantitatively demonstrate the value of CBO services in improving health care outcomes and reducing health care system costs
- Enable CBOs and providers to enter into and benefit from value-based payment arrangements

### Requirements of the Project

At the completion of this grant, successful applicants will:

- **Develop readiness to integrate and negotiate formal agreements with clinical providers** such as primary care providers, advanced networks, and/or hospitals. Participants would develop their readiness across multiple dimensions over 8 to 10 months, including:
  - **Assessing and documenting data and information about the populations CBOs serve.** In this step, the participants would develop an in-depth understanding of the populations they serve. This would include input from the individuals they serve, and quality and other performance data. This would support a shift in focus from programs to populations, which is more aligned with how clinical providers assess their performance. By having information about their populations at their fingertips, CBOs will better be able to demonstrate their value in terms that are meaningful to potential clinical partners.
  - **Assessing clinical partners.** In this step, participants would develop an understanding of their clinical partner, including who they are, who they serve, what their needs are, and how they are positioning themselves in the market. This assessment will enable participants to make informed decisions about how they can best engage with their clinical partner.
  - **Collecting data and information that demonstrates performance.** In this step, participants would use the best available data and information they have to document their ability to produce and/or contribute to clinical and cost outcomes in an integrated partnership.

- **Identifying gaps in their systems and processes.** As they progress through the previous steps, participants would also assess and document gaps in their current systems that would inhibit their ability to implement or operate successful integration strategies with a partner. They would identify options and develop plans to address significant gaps. For example, they may decide to negotiate for access to a system in a partnership (e.g., an information technology system).
- **Identifying their value proposition.** Using information from the previous steps, participants would document what they can offer that is valuable as an integration partner with identified potential partners. This will be used as an essential tool in their negotiation strategy.
- **Defining their financial goals and parameters.** In this last readiness step, participants would develop realistic financial goals and key parameters that will help them negotiate the financial terms of an integration arrangement. Participants would assess their true costs for achieving the outcomes for defined populations and the “market value” of those outcomes. They would understand and prioritize the types of financial arrangements they would pursue and establish price parameters to ensure that the financial arrangements support their sustainability.
- **Execute formal integration agreements.** In this phase, participants would enter into negotiations with potential integration partners and execute a formal arrangement with at least one clinical provider over 6 to 10 months. This will include but not be limited to agreements related to the scope of integration; roles and responsibilities; performance measures, measurement, and expectations;<sup>3</sup> data sharing; partnership parameters; financial arrangements; and legal and security terms.
- **Develop and implement clinical-community integration with partner provider.** In this phase, participants and their partners would develop and implement specific integration strategies over 8 to 12 months. It would include but not be limited to developing and implementing integration models, service-level roles and responsibilities, assessment tools, performance management systems, work flows, and data- and information-sharing strategies.

### Technical Assistance

CT Health will engage an external consulting firm to provide technical assistance to awardees to assist with the achievement of project goals. This may include trainings, educational materials, tools, templates, and coaching on topics such as:

- IT systems, data, and measurement
- Value proposition of CBO services
- Financial goals and parameters
- Quality improvement and performance management systems
- Partnership negotiations and formal agreements
- Ongoing engagement of community members to inform strategies and provide input
- Others based on awardee need

Awardees will be required to take advantage of these resources.

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<sup>3</sup> Including specific measures for health disparities and health equity.

## Timeline and Funding

This is a three-year initiative that will require annual renewal. Funding in Year 1 will be up to \$50,000 - \$75,000 to support eligible program expenses. (See budget section for details.) Funding for years 2 and 3 are contingent upon demonstrated progress against project objectives in the prior year.

## Eligibility

Eligible applicants will consist of an established formal or informal collaborative or partnership of a minimum of three CBOs (“co-applicants”) and one clinical partner.

- CBO co-applicants include but are not limited to those that provide social services, housing, and substance use disorder services.
- Clinical partners include health care providers who provide physical and/or mental health clinical services.

This partnership must be demonstrated in the project narrative and letters of support. The clinical partner must specifically indicate its commitment to working with the CBOs to achieve grant goals and objectives in its letter of support. The project narrative should also indicate any previous collaboration among partners.

Co-applicants will be the organizations that receive technical assistance provided through this initiative. Co-applicants may also choose to include other CBO partners in this effort; however, these partners will not receive the technical assistance supported by CT Health.

Co-applicants will be required to select one CBO to serve as the fiscal agent for the grant. Co-applicants must be 501(c)(3) organizations to be eligible for funding.

## Decision Making Criteria

CT Health will evaluate applicants based on the following criteria:

- **Readiness.** Strength of partnership (e.g., demonstrated engagement/commitment of CBOs, demonstrated engagement/commitment of clinical partner) and awareness of needs, strengths, and gaps.
- **Impact.** Demonstrated community need and number of community members impacted, especially people of color.
- **Proposed Methods.** Appropriateness and feasibility of project plan and approach, ability to generate meaningful and measurable results, qualifications of participating staff and partner organizations, outcomes planned to be accomplished in year one and over three years of project.
- **Budget.** Appropriateness of budget request, alignment with project activities, and impact based on funds requested and clients served.

To apply, visit CT Health’s applicant portal at <https://cthealth.fluxx.io> and register for login credentials. Once you receive your credentials, log into the portal and navigate to “Apply: Requests for Proposals.”

Collaboratives are required to submit a concept paper through the applicant portal. Applicants who are invited to submit a full proposal will be alerted by CT Health staff.

## RFP Full Proposal Contents

### A. Lead Applicant and Other Participating CBOs Organizational Background

- Describe each CBO co-applicant. Indicate which organization will be the fiscal agent. Provide the following information for CBO co-applicant:
  - Describe years in operation, geographic coverage and catchment area, services provided, and service delivery model.
  - Provide the number of unique clients or patients served and any demographic data available describing the population served in 2018. (If 2018 data is not available please provide for the most recent full year you have.) Include race/ethnicity data.
  - Describe your staffing model, including number of service providers and administrative staff.
  - Describe management/oversight structure and board of directors (if applicable).
- Describe how your organizations currently work together (if applicable), including any past collaborative projects.
- Provide **letters of support** from each co-applicant that will participate in this project. Also provide a letter of support from the clinical provider that contains information indicating that the clinical provider is committed to working with the CBO co-applicants to achieve this project's goals.

### B. Project Narrative

Provide an overview of your proposed project. Include the following components in your description:

- Indicate why your organizations are interested in pursuing this funding opportunity
- Describe the need for this project and the value it will bring to the clients and community served
- Describe how your organizations work together and with the health care partner, providing examples of how you collaborate with these organizations.
- Identify organizations with whom you share a significant portion of clients/patients who do not currently have partnerships with that would help to advance the goals of the proposed project.

### C. Proposed Methods

Explain the activities that will be undertaken to achieve the specific objectives and requirements outlined in this RFP.

Project activities must include:

- Objectives the applicant plans to achieve over the three-year project period as well as what will be accomplished in Year 1
- Activities to address known barriers, particularly those raised in section (B) Project Narrative
- Resources and expertise to be secured
- Staff members and their qualifications that will be assigned to this project

- Description of the CBO partnership, including a matrix with a list of partners and a brief description of their role(s), how the partnership will be managed, and how decisions will be made
- Plans to grow and sustain partnerships (e.g., recruit more CBOs as partners)
- Plans to incorporate community member input into planning, design, and implementation

Provide a **project workplan** for the grant period Year 1 that includes objectives, activities, and timeline (start/end dates). Methods and work plan must be closely supported by the budget; any expense in the budget needs to be included in this section.

For *each* CBO co-applicant, please describe the following:

- **Data and information systems regarding populations served.** Describe your organization's current capacity for collecting and reporting on need and outcomes data on the populations served, including staff, paper and/or electronic systems and other resources used; client surveys/assessments; and uses of data. Identify current gaps that prevent you from fully understanding, tracking, and reporting on the needs and outcomes of the population you serve.
- **Quality management.** Describe how quality data is used to inform programmatic changes and provide recent example(s).
- **Service integration.** Describe what your organization has done to better integrate services within your organization and ensure that your clients have and get access to any of your services.
- **Social determinants of health.** Describe what your organization has done to address social determinants of health/social factors that impact health. Indicate positive outcomes of that work.
- **Financial and utilization systems.** Describe your capability to monitor and track service utilization and cost by client and service delivery line, including any systems used. Describe any current limitations you face in obtaining and using this information that would impact your ability to achieve project goals.

#### D. Cultural and Linguistic Competence

For *each* participating CBO co-applicant, please describe your organizational commitment to cultural and linguistic competence. Describe how your services are provided in a culturally competent manner, including delivery of services in languages other than English. Describe how, if funded, this project would be implemented with cultural and linguistic competence.

#### E. Evaluation

Based on your workplan, include an evaluation plan to track the success of the project. This should include measures that allow for an evaluation of progress toward that work plan as well as inform your decisions during the course of the project. In the first year, much of your evaluation will be focused on tracking process measures, i.e., what you did, how much of that you did, the degree to which you met

the goals in your work plan, improvements you made to the work plan, and products or changes that resulted from your efforts.

Some examples of the kinds of measures that could be included in your evaluation plan are:

- Engagement of leadership, as measured by leadership involvement in meetings and the development and implementation of project
- Activities and monthly assessment of progress toward milestones, challenges encountered, and how challenges were managed and overcome
- Appropriate and timely meetings with people served by the organization and with potential clinical partners, as documented by meetings held, meeting notes, incorporation of input received into planning, and messaging
- Development of new data system or revisions of existing data systems as measured by your ability to access and/or share relevant data
- Development of new methods of collecting data and analyzing data, as measured by data collection plan and data output
- Training of staff on new methods of collecting data, new analytic methods, and new data systems, as measured by training documentation and ability of staff to conduct these tasks
- Cost analysis study, as measured by a report and talking points for key staff to use in meetings with clinical providers
- Trainings for key staff on materials and messaging, as measured by training documentation and ability of staff to comfortably and effectively talk about the value proposition
- Formal agreement with at least one clinical partner
- Development of community integration plan with partner
- Development and implementation of work plan with partner, as documented by work plan and documentation of progress toward work plan

#### F. Budget and Budget Narrative

Provide a budget following the template provided. The budget request should include an overall estimated amount for the full three-year grant period and a detailed request for Year 1. Subsequent years will require an annual renewal. Grant Year 1 starts upon grant award.

Please follow CT Health's budget guidance for allowable costs (<https://www.cthealth.org/what-we-do/grantmaking/seeking-a-grant/>). Funds for this project should be used to support project goals. Funds cannot be used to support direct service delivery. Costs that may be considered appropriate include legal, consulting, and other services that would augment the expertise or bandwidth of participants (e.g., assessing potential partners, system gaps, assessing costs and value, developing formal agreements). Please note that CT Health will be funding technical assistance through an external consulting firm and those costs do not need to be included in budget requests.

Provide a separate budget narrative to explain all costs requested, including assumptions.