



## Request for Proposals (RFP):

Design of a National, Virtual Model for Delivering the National Diabetes Prevention Program to Health Center Patients with Diabetes and their At-Risk Family Members

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RFP Released: November 18, 2020  
Proposals Due: December 8, 2020

### Points of Contact

Training and Technical Assistance Department, NACHC – Phone (301) 347-0400

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Submission Process Inquiries: Latisha Harley ([lharley@nachc.org](mailto:lharley@nachc.org))

## **Organization Overview**

The [National Association of Community Health Centers](#) (NACHC) was founded in 1971 to “promote the provision of high quality, comprehensive and affordable health care that is coordinated, culturally and linguistically competent, and community directed for all medically underserved populations.”

NACHC:

- Serves as the leading national advocacy organization in support of community-based health centers and the expansion of health care access for the medically underserved and uninsured.
- Conducts research and analysis that informs both the public and private sectors about the work of health centers, their value to the American health care system and the overall health of the nation’s people and communities – both in terms of costs and health care outcomes.
- Provides training and technical assistance to support and strengthen health center operations, clinical quality, leadership development and governing Boards of Directors at health centers across the country.
- Develops partnerships with the public and private sectors to build stronger and healthier communities.

## **Purpose**

The NACHC Training and Technical Assistance (TTA) Program assists existing and potential health centers in addressing operational demands while sustaining their health care access mission, a community governance model and a commitment to cultural and linguistic competence in healthcare delivery to underserved and vulnerable populations. Through a diverse cadre of subject matter experts and delivery venues, the NACHC TTA Program is highly utilized and well prepared to respond to emerging healthcare delivery issues. Specifically, NACHC maintains a professional cadre of experts to provide health center professionals with quality instruction and technical assistance resources based in adult learning principles, advanced instructional design and an understanding and application of technology to enhance TTA delivery. The U.S. Health Resources and Services Administration (HRSA) provides resource support to NACHC to improve health center operational and clinical outcomes through the provision of coordinated, collaborative TTA.

## **RFP Services Desired**

Through this Request for Proposal (RFP), NACHC is seeking qualified organizations and/or individuals with health center expertise in launching a National Diabetes Prevention Program (NDPP).

To improve diabetes control among health center patients while also tackling diabetes prevention - an issue of critical national importance - NACHC plans to launch a family-centered strategy for diabetes control and prevention. This program will follow the Center for Disease Control and Prevention’s (CDC) approved lifestyle management program - the National Diabetes Prevention Program (NDPP), which provides patients a curriculum that addresses healthy eating, physical activity, and stress management through regular group meetings and support over the course of a year. Studies show that the NDPP curriculum, delivered in-person or virtually, can effectively help participants lose weight and cut their risk of developing diabetes by half, and virtual delivery can provide access to the NDPP to patients without a local program.

The vendor will work with NACHC to design a national strategy to operationalize a virtual, lifestyle management curriculum for health center patients with diabetes (HbA1c >9%) and at-risk/pre-diabetic

family members. Utilizing the CDC-approved NDPP curriculum, the vendor will design a program model that factors in NACHC's collaboration with PCAs/HCCNs in the content, timing, and delivery of the NDPP tailoring it in a way that best meets the needs of health centers. This development work and program design will reflect NACHC's systems-approach to the transformation of diabetes care, diabetes prevention, and management as a part of whole person care. This tailoring will take a systems-approach to diabetes control and prevention, including drawing from the resources and tools available through NACHC's [Value Transformation Framework](#), diabetes resources such as the [Diabetes Change Package](#), and the [Diabetes Action Guide](#). The designed program should be submitted to DPRP for Pending Recognition by June 2021 and program should be launched, or ready to launch in June/July 2021. Joint applications/proposals by a team of unique and independent consultants/organizations are permitted. If submitting a joint submission, please denote individual trainer costs in the budget template.

## **Time Period**

**Time period for services is January 1, 2021 through June 30, 2021.** Vendor(s) may be retained for a multi-year period of service, based upon successful performance during period of initial service (contract year ending June 30, 2021) and on-going availability of funds.

## **Funding & Budget Information**

Funding: Health Resources Service Administration (HRSA)

Budget for this project is up to \$75,000. Multiple vendors may be selected depending on scope of skills/expertise.

## **Scope of Work and Deliverables**

Selected vendor(s) will work with NACHC staff to design and scale a national model for virtual delivery of the NDPP to health center patients and their family members. The vendor will support the submission of the designed program to the Diabetes Prevention Recognition Program (DPRP) for Pending Recognition by June 2021. The designed program must meet all criteria required for CDC Pending Recognition. The program should be ready to implement, or with implementation underway, by June/July 2021. If requested, the program may be transferred to another entity at the end of the project period.

NACHC is seeking vendors that meet the following qualifications:

- Experience in preparing an application for CDC recognition of a NDPP, including use of a CDC-approved curriculum that meets the duration, intensity, and program requirements described in CDC's Diabetes Prevention Recognition Program Standards and Operating Procedures.
- Must be a trained NDPP Lifestyle Coach.
- Must have experience operationalizing the NDPP and/or serving as the NDPP program coordinator/data preparer and guiding health centers through CDC-recognition.
- Must have knowledge of common NDPP implementation barriers experienced by community health centers as well as experience addressing these barriers.
- Must have knowledge of NDPP reimbursement strategies.
- Must have knowledge of health center payment/reimbursement methodologies.

Preferred qualifications include:

- Experience implementing virtual diabetes programs.

#### Deliverables:

Selected vendor(s) will produce a national blueprint or strategy for virtual rollout of the NDPP curriculum - one that can be transitioned over time to primary care associations, health center-controlled networks, or other entities. The blueprint or strategy must include, but is not limited to:

- Curriculum targeting the 'traditional' NDPP target group (individuals at-risk for diabetes) by identifying this target population through targeting of health center patients with diabetes.
- Strategies for ensuring a smooth recognition process; with submission for Pending Recognition completed.
- Strategies to reduce administrative burdens and streamline data collection and reporting procedures.
- Reimbursement strategies for the period prior to CDC Full Recognition as well as reimbursement guidance for after CDC Full Recognition is achieved.
- Enhancements or 'add-ons' to the NDPP curriculum that will generate interest and participation from health center patients and their family members.
- Guidance around selection and set up of technology required to run a virtual NDPP.

### **Information Requested**

Proposals must be submitted using NACHC's web-based portal by **December 8, 2020, 11:59 pm PT (i.e. December 9, 2:59 am ET)**. The system will notify you upon your successful submission into the portal. Incomplete proposals will not be considered. If NACHC selects your proposal, you will be notified on or around **December 15, 2020**.

Online Submission Portal: [https://nachc.co1.qualtrics.com/jfe/form/SV\\_2bmoOnF8s1TyTwp](https://nachc.co1.qualtrics.com/jfe/form/SV_2bmoOnF8s1TyTwp)

Proposals must include the below items, which are evaluated based on the specific criteria outlined in the Evaluation table below.

- **Point of Contact Information**
- **Name / Description of Organization**
- **Capability Statement\***
- **Education and Experience\***
- **Quality of Work Samples\***
- **Daily and Hourly Rates**
- **Signed Statement** (see below)

\* For qualified vendor(s) who have previously responded to NACHC's RFI, you may indicate in your response to this RFP if you prefer NACHC to utilize your previously submitted item(s) which are on file. These item(s) are marked with an asterisk.

### **ATTESTATION**

By my signature below, I hereby certify that this Proposal reflects my best estimate of the capability of organization and the true and necessary costs for the project, and the information provided herein is accurate, complete and current as of the date of my signature below.

I agree that my electronic signature is the legal equivalent of my manual signature on this application. By typing my name below, I certify that the information provided in the application is true and accurate.

**Print Name:**

**Title:**

**Organization:**

**Signature:**

**Date:**

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](http://HRSA.gov).

## **Evaluation Criteria**

Complete proposals will be evaluated using the criteria below.

<b>Rating Factor</b>	<b>Application Selection Criteria</b> <b>To earn full points in each domain, the applicant must demonstrate:</b>	<b>Points</b>
<b>Capability Statement*</b>	<p>Capability statement that demonstrates ability to deliver technical skills and/or subject matter expertise. Please ensure that statement addresses your ability to work with others and collaborate.</p> <p>Page Limit for Capability Statement: 2 pages</p>	15
<b>Experience &amp; Education*</b>	<p>Resume(s)/CV(s) of expert(s) / staff clearly show tenure, professional experience, and/or education that reflects knowledge and ability in content expertise and training. Submitted documents should reflect expertise in all areas in which that applicant has proposed qualification for.</p> <p>Page Limit for Resume(s) / CV(s): 2 pages per key expert / staff</p>	30
<b>Quality of Work Samples*</b>	<p>Work samples must demonstrate understanding of SME areas as described in this RFP. Where appropriate, understanding of adult learning needs and content knowledge should be evident.</p> <p>Applicants must submit:</p> <ul style="list-style-type: none"> <li>• A brief statement summarizing work samples and experience. (1-2 pages)</li> <li>• 2-3 work samples (e.g.: presentation(s), supplementary training product(s), publications developed, etc.) delivered by vendor that demonstrate understanding of the specific content area, as described in this RFP.</li> <li>• Past client evaluations, reference letters, and/or testimonials demonstrating quantitative and/or qualitative feedback from at least two audiences, clients, or engagements occurring within a year of RFP application date. (1-2 pages)</li> </ul>	40
<b>Daily and Hourly Rates</b>	<p>Daily and Hourly Rates for all expert(s) and staff that may be engaged in work are reasonable. Rates should reflect overall cost rate inclusive of any fringe, overhead and/or general &amp; administrative expense (G&amp;A), if required.</p> <ul style="list-style-type: none"> <li>• "Reasonableness" is assessed based on market or industry standards and in consideration of the not-for-profit status of health centers and NACHC.</li> </ul>	15
<b>Total</b>		100

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