

Request for Proposals (RFP):

New Models of Health Center Service Delivery

RFP Released: October 5, 2021

Proposals Due: October 19, 2021

Points of Contact

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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

NACHC assists existing and potential health centers in addressing clinical and 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, NACHC 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 on adult learning principles, advanced instructional design and an understanding and application of technology to enhance delivery of training and technical assistance. 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 training and technical assistance.

RFP Services Desired

In the current healthcare landscape, amidst a continuing COVID-19 pandemic and other public health emergencies, new health center service delivery models are required, particularly those that focus on virtual and telehealth models and include enabling services. To meet the need for new service delivery models, including documented workflows in support of new models, NACHC will engage primary care associations (PCAs), health center-controlled networks (HCCNs), and health centers in the design of new service delivery models. Project activities will include engaging the health center workforce in the design and documentation of new service models that use technology to support virtual and telehealth care.

Through a national, coordinated model, NACHC and partner PCAs/HCCNs, will work together with health center staff to design and document virtual models of care using tools and technology to support remote engagement. Documentation will include the ways patients are provided with instruction, education, and tools to support their virtual engagement in care.

Through this Request for Proposal (RFP), NACHC is seeking:

- 1. Three (3) PCAs and/or HCCNs.
- 2. 10-12 health centers to design and document new models of virtual care.
- 3. One (1) technical writer to create and/or edit project documentation such as training materials, project summaries, etc.
- 4. One (1) graphic designer to create graphics and layout of program materials.
- 5. One (1) data and model analyst to support gathering and analysis of data.
- 6. Organization(s) providing support and enabling services that enhance new models of virtual care (e.g., nutrition, transportation, education, etc.).

PCA/HCCN Role

The selected PCAs/HCCNs will play a key role in supporting health centers in the design and documentation of new models of virtual care. Key areas of PCA/HCCN Hub responsibility include:

- Support participating in health centers in the design of new models of virtual care.
- Document new service delivery models and models of care, including workflows, new/expanded job roles, and tools and resources in support of new models.

Health Center Role

Health centers will design and document new models of virtual care. Key areas of health center responsibility include.

- Design and documentation of new service delivery models and models of virtual care.
- Development of workflows, new/expanded job roles, and tools and resources in support of new service delivery models.

Technical Writer Role

The vendor will support compilation of PCA/HCCN and health center models of care and workflows into program summaries and reports.

Graphic Designer Role

The vendor will support the creation of graphics and design of summaries or reports and related program materials.

Data and Model Analyst

The vendor will support analysis of new service delivery models, including identifying, gathering, and analyzing data.

Organizations Providing Support and Enabling Services

The vendor(s) will offer services in support of patients engaged in new models of care (e.g., nutrition, transportation, education, etc.).

Program Structure

This NACHC-led project will engage with PCAs/HCCNs, and their selected member health centers, and selected contractors to design and document new health center service delivery models that focus on virtual models of care and use of enabling services. These new models of care are particularly vital in light of the

ongoing COVID-19 pandemic and the attention that is needed to support the health center workforce through the development of new and different ways to deliver care to health center patients.

Selection of vendors in response to this RFP will be made in October. Program start-up will take place from November -December 2021, with design of new models of care completed by January 2022, and ongoing documentation and revised design from February – June 2022.

Time Period

Time period for services is October 25, 2021 through June 30, 2022. Vendor(s) may be retained for a multi-year period of service, for this and related services, based upon successful performance during the period of initial service (contract year ending June 30, 2022) and on-going availability of funds.

Timeline:

- October 2021:
 - o October 5, 2021: RFP released.
 - October 19, 2021. Applications submitted online to NACHC by 11:59 pm.
 - o Vendors notified of selection decision by October 22, 2021.
- November December 2021:
 - NACHC works with PCAs/HCCNs and health centers to design and document new service delivery models and workflows.
 - NACHC works with selected contractors to support new care model design.
- January to June 2022:
 - o PCAs, HCCNs, and Health Centers document new care models, workflows, and related project resources; revise models, workflows, and supporting materials, as needed.

Funding & Budget Information

Funding: Health Resources Service Administration (HRSA)

Funding available to support the work of this program is approximately \$100,000, to be distributed across selected vendors based upon the scope of work and skills/expertise.

Scope of Work and Deliverables

PCA/HCCN Deliverables:

- Summary of the model used by the PCA/HCCN to support participant health centers.
- Documentation of new health center service delivery models and models of care, including workflows, new/expanded job roles, and tools and resources in support of new models.

Health Center Deliverables:

- Documentation of new service delivery models and models of care, including workflows, new/expanded job roles, and tools and resources in support of new models.
- Summary of the process used to design and test new service delivery models and models of virtual care.

Technical Writer Role:

- Program Summary capturing the experience and results of the program.
- Written synthesis and compilation of PCA/HCCN and health center models of care and workflows.

Graphic Designer Role:

• Graphics and design for program summaries, reports, and materials.

Data and Model Analyst:

Analysis and summaries (written and visual) of data from new service delivery models.

Organizations Providing Support and Enabling Services:

• Tangible services and/or support for patients engaged in new models of care (e.g., nutrition, transportation, education, etc.).

Information Requested

Proposals must be submitted using NACHC's web-based portal by **October 19, 2021.** The system will notify you upon your successful submission into the portal. Incomplete proposals will not be considered. NACHC will notify all applicants on or around **Friday, October 22, 2021**.

Online Submission Portal: https://nachc.co1.gualtrics.com/jfe/form/SV beKUOqEO6UOjgnk

Proposals must contain 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*
- List of Potential Participant Health Centers (For PCAs/HCCNs Only)
- Daily and Hourly Rates
- Signed Statement (see below)

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.

^{*} For qualified vendor(s) who have previously responded to NACHC's 2020-2023 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.

| 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.

Evaluation Criteria

Complete proposals will be evaluated using the criteria below.

| Detine France | Application Selection Criteria ctor To earn full points in each domain, the applicant must demonstrate: | |
|--|---|-----|
| Rating Factor | | |
| Capability Statement* | Capability statement that demonstrates ability to deliver technical skills and/or subject matter expertise on the topic. Please ensure that statement addresses your ability to work with others and collaborate. Page Limit for Capability Statement: 1 page | 15 |
| Experience & Education* | Resume(s)/CV(s) of expert(s) / staff clearly show tenure, professional experience, and/or education that reflects knowledge and ability in content expertise. Submitted documents should reflect expertise in all areas in which that applicant has proposed qualification for. Page Limit for Resume(s) / CV(s): 2 pages per key expert / staff | 30 |
| Quality of Work Samples* | Work sample must demonstrate professional experience, and/or education that reflects knowledge and ability in content area to which proposal submitted. Applicants must submit: A brief statement summarizing work samples and experience. (max. 500 words). A work sample (e.g.: presentation(s), supplementary training product(s), publications developed, etc.) delivered by vendor that demonstrate understanding of the specific SME area, as described in this RFP. | 40 |
| List of Potential Participant Health Centers (For PCAs/HCCNs Only) | PCAs/HCCNs must provide a list of potential participant health centers and include the following for each health centers. • Name and address of potential participant health centers. | n/a |
| Daily/Hourly Rates and Budget Narrative | 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 & administrative expense (G&A), if required. • "Reasonableness" is assessed based on market or industry standards and in consideration of the not-for-profit status of health centers and NACHC. | 15 |
| Total | | 100 |