# STATE OF WYOMING DEPARTMENT OF HEALTH PUBLIC HEALTH DIVISION CHRONIC DISEASE PREVENTION PROGRAM 122 W. 25TH STREET, 3RD FLOOR WEST CHEYENNE, WY 82002

REQUEST FOR APPLICATION NO. CDPP001

## **Healthcare Systems Grant**

OPENING DATE May 15, 2024

DEPARTMENT OF HEALTH REPRESENTATIVE: KACIE HUTTON TELEPHONE NO.: (307) 777-7356

### FUNDING OPPORTUNITY OVERVIEW

### 1. DESCRIPTION:

The Wyoming Department of Health (WDH) Chronic Disease Prevention Program (CDPP) is accepting applications for a Healthcare Systems Grant designed to support two Wyoming healthcare systems in the implementation or increased use of a standardized process (e.g. social determinants of health [SDOH] screening tool) to identify patients in need of social services support and utilize a bidirectional referral system (e.g. health information exchange (HIE), community information exchange (CIE), or other care hubs) to refer patients to relevant lifestyle change programs and safety net resources in the area. Organizations who are awarded this grant will be required to develop or enhance their already existing Electronic Health Record (EHR)-integrated system to identify patients with hypertension or high cholesterol and refer those patients to the appropriate program.

### 2. RATIONALE:

Heart disease is the leading cause of death for men, women, and people of most racial and ethnic groups in the United States<sup>1</sup>. About half of U.S. adults have at least one of the following major risk factors for cardiovascular disease: uncontrolled high blood pressure, uncontrolled high low-density lipoprotein (LDL) cholesterol, type 2 diabetes, or are current smokers<sup>2</sup>.

Lifestyle change programs provide information, skills, and support to help persons at risk for chronic diseases, such as cardiovascular disease, engage in health promotion behaviors including physical activity, healthy nutritional intake, stress management, and connecting with others to reduce risk for and/or manage chronic diseases. These programs are research-backed and provide proven health benefits<sup>3</sup>. CDC supports lifestyle change programs because research shows they work.

In addition to referring to lifestyle change programs, the National Committee for Quality Assurance (NCQA) has endorsed specific evidence-based quality measurements such as National Quality Forum (NQF) 0018: Controlling High Blood Pressure and NQF 0439: Discharged on Statin Medication, because it is important for all providers to be consistent in collecting and reporting patient-level data for hypertension detection and cholesterol control<sup>4</sup>. However, quality measurement results only describe an observed level of activity and not the bigger picture. Results cannot reveal which factors, such as SDOH, account for differences in measured levels of quality. Interventions in SDOH can improve hypertension and cholesterol management and overall health promotion.

The Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE) is a national effort to help healthcare centers and other providers collect the data needed to better understand and act on their patients' SDOH. As providers are increasingly held accountable for reaching population health goals while reducing costs, it is important that they have tools and strategies to identify the upstream socioeconomic drivers of poor outcomes and higher costs. With data on the SDOH, healthcare centers and other providers can define and document the increased complexity of their patients, transform care with integrated services and

community partnerships to meet the needs of their patients, advocate for change in their communities, and demonstrate the value they bring to patients, communities, and payers<sup>5</sup>.

By screening, testing, and referring eligible patients to evidenced based lifestyle change programs, more at-risk adults in Wyoming will obtain accurate and timely diagnoses and proper management of their condition. Incorporating this activity into a policy or system within a healthcare organization, particularly one embedded in their EHR, can help maintain sustainability of screening, testing, and referral activities. In addition, embedding an SDOH screening tool into the EHR or utilizing other social needs platforms, will allow Wyoming clinics and healthcare systems to monitor healthcare disparities in their patient population by stratifying evidenced based quality measures (e.g. NQF 0018 and NQF 0439) by patient demographics. These identified demographics can then be used to implement activities or lifestyle change programs to eliminate healthcare disparities.

### Strategies

- 1. Promote the use of standardized processes or tools to identify the social services and support needs of patient populations at highest risk of cardiovascular disease, with a focus on hypertension and high cholesterol, and monitor and assess the referral and utilization of those services, such as food assistance, transportation, housing, childcare, etc.
  - a. Provide funding to one healthcare system to implement a standardized process (e.g. SDOH screening tool) to identify patients in need of social services support and utilize a bidirectional referral system (e.g., HIE, CIE, or other care hubs) to refer patients to relevant lifestyle change programs and safety net resources in the area.

### Performance Measures

- 1. NQF 0018- Controlling High Blood Pressure (CMS 065)
- 2. NQF 0439- Discharged on Statin Medication (CMS 347)
  - a. Optional Quality ID #487 Screening for Social Drivers of Health
- 3. Number and percent of clinics or health care systems that use standardized processes or tools to identify, assess, track, and address the social services and support needs of patient populations at highest risk of cardiovascular disease.
- 4. Number and type of social services and support within the recipient's network that address the social needs at highest risk of cardiovascular disease.
- 5. Number of adults with hypertension, high cholesterol, or other risk of cardiovascular disease who are referred to lifestyle change programs or social services and support.

### References:

- 1. https://www.cdc.gov/heartdisease/facts.htm
- 2. https://www.cdc.gov/heartdisease/risk factors.htm
- 3. <a href="https://www.cdc.gov/diabetes/prevention/why-participate.html">https://www.cdc.gov/diabetes/prevention/why-participate.html</a>
- 4. <a href="https://www.ahrq.gov/patient-safety/quality-resources/tools/chtoolbx/understand/index.html">https://www.ahrq.gov/patient-safety/quality-resources/tools/chtoolbx/understand/index.html</a>
- 5. PRAPARE https://prapare.org/
- 6. Measure definitions
  - a. Controlling High Blood Pressure
  - b. Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
  - c. Screening for Social Drivers of Health

### 3. OBJECTIVE:

The objectives of this grant include: 1) the implementation or increased utilization of a SDOH screening tool; 2) the integration or increased utilization of a bidirectional referral system (e.g. HIE, CIE, or other care hubs) to refer patients to relevant lifestyle change programs and safety net resources in the area; and 3) the increased screening, referral, and enrollment of adults identified at risk for hypertension or high cholesterol into a CDC-recognized lifestyle change program or safety net resource.

### 4. ELIGIBLE APPLICANTS:

The CDPP is seeking applications from Wyoming organizations that are in good standing with the Wyoming Secretary of State and registered on SAM.gov. Healthcare organizations that provide direct patient care and use an EHR are eligible to submit an application. Eligible organizations may include but are not limited to: hospitals, primary care clinics, diabetes education centers, nursing homes, cardiac rehabilitation centers, urgent care clinics, and public health offices. Awardees will be held responsible for the performance of the contract. Awardees must report activities to the CDPP.

### 5. FUNDING AVAILABLE AND NUMBER OF AWARDS:

Total funding available for this RFA is sixteen thousand dollars (\$16,000.00). Funding will be awarded to two applicants for eight thousand dollars (\$8,000.00) per awardee. Applicants are not guaranteed the maximum amount of funding and prospective recipients are expected to submit a budget that is appropriate for the project plan and scope.

### 6. RFA APPLICATION DETAILS:

Applications will be funded on a first come basis until available funding is exhausted. Only completed applications will be accepted.

### **QUESTIONS:**

Applicants will be allowed the opportunity to email questions regarding this funding opportunity. All questions should be submitted to Kacie Hutton, Chronic Disease Prevention Specialist, at kacie.hutton1@wyo.gov. Answers to all questions will be posted publicly on the CDPP website. Please include "RFA: Question" in the email subject line.

### **SUBMITTING COMPLETED APPLICATION:**

Applicants should submit a completed application via email to Kacie Hutton, Chronic Disease Prevention Specialist, at kacie.hutton1@wyo.gov. Please submit a single PDF document and include "RFA: Application Submission" in the email subject line. Following submission, applicants will receive a confirmation email verifying receipt of the application within two business days.

### **NOTIFICATION OF AWARD OR NONAWARD:**

Applicants will receive written notice as to whether the application has been approved to be funded wholly, in part, or not funded within two (2) weeks of submission. Selected applicants will begin the contract process with the CDPP. All funded activities must be completed within the term of the contract.

### 7. TERM OF CONTRACT:

The contract will begin when signatures are received from all parties. All funds must be spent by June 29, 2025. Projects should have sustainability in mind and continue after the initial funding period ends. There will be no opportunity for renewal of funding.

### 8. NON-APPROVED USE OF FUNDS:

The CDPP will not be able to fund programs that are not part of a strategic plan that addresses the objective of this grant. Below is a list of examples of activities and other items that are not allowable under the grant. This list is not all inclusive and all programmatic activities must be approved by the CDPP.

- 8.1 One-time activities or events that are not considered evidence based, such as assemblies, speakers, "fun runs," etc. Additionally, community gardens, farmers markets, greenways, or other similar developments cannot be funded.
- 8.2 Programs funded through other sources. Funds through this RFA can supplement current activities but cannot supplant other funding for those programs.
- 8.3 Direct service to clients/constituents, e.g., medical nutrition therapy sessions with a dietitian.
- 8.4 Provision of professional development by unqualified individuals or use of programs that do not have a strong evidence base e.g., promoting a specific dietary supplement or for-

profit exercise program. Programmatic activities must be approved by the CDPP. Please see "resources" section below for examples of evidence-based programmatic activities.

- 8.5 Capital construction projects or purchase of building or other long-term projects.
- 8.6 Purchase of computers, other technological devices (e.g., iPad), or office equipment other than standard consumable supplies.
- 8.7 Payment of expenses for lobbying.
- 8.8 Food and beverages of any type for any meeting or event.
- 8.9 Gifts, prizes, or other compensation for trainees or participants.

### 9. RESOURCES:

The following web link provides some resources that may be helpful:

### **PRAPARE**

### 10. TIME LINE:

May 15, 2024 RFA opens

June 29, 2025 Grant funds must be spent

### 11. RESERVED RIGHTS:

The CDPP reserves the right to:

- 11.1 Reject any or all applications received in response to this RFA;
- 11.2 Not make an award to any applicant who is not in good standing at the time a contract is awarded;
- 11.3 Withdraw the RFA at any time, at the CDPP'S sole discretion;
- 11.4 Make an award under this RFA in whole or in part;
- 11.5 Negotiate with the successful applicant within the scope of the RFA in the best interests of the State;
- 11.6 Disqualify any applicant whose conduct and/or application fails to conform to the requirements of this RFA;

- 11.7 Seek clarifications and revisions of applications;
- 11.8 Use historic information obtained through site visits, business relationships, and the State's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFA;
- 11.9 Amend the RFA to correct errors or oversights, or to supply additional information as it becomes available;
- 11.10 Change any of the scheduled dates;
- 11.11 Eliminate any mandatory, non-material specification that cannot be met by all of the prospective applicants;
- 11.12 Waive any requirement that is not material;
- 11.13 Conduct contract negotiations with the next responsible applicant, should the CDPP be unsuccessful in negotiating with the selected proposer;
- 11.14 Utilize any and all ideas submitted in the applications received;
- 11.15 Require correction of simple arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an application and/or to determine an applicant's compliance with the requirements of the solicitation; and
- 11.16 Cancel or modify contracts due to insufficiency of appropriations.

### 12. <u>APPLICATION REVIEW PROCESS:</u>

Applicants will be evaluated based upon the weighted evaluation factors described in Appendix B. A group of reviewers will be established to evaluate all completed applications and make recommendations based upon final scores. The CDPP may contact an applicant for clarification or questions related to the application.

### APPLICATION

### 1. GENERAL FORMAT REQUIREMENTS:

Applications must follow the general requirements when submitting to this RFA:

- 1.1. Application must be typed in Times New Roman, no smaller than 11 point font, with 1 inch margins on standard paper (8.5" x 11").
- 1.2. Applications must be organized by sections labeled below (in bold).
- 1.3. Applications must be submitted as a single PDF file and include all application requirements.

### 2. <u>APPLICATION REQUIREMENTS:</u>

- 2.1. Cover Sheet. Please include the following applicable information in your cover sheet: (1 page maximum)
  - a. Name of Applicant Organization (as registered with the Wyoming Secretary of State)
  - b. Tax ID
  - c. DUNS Number
  - d. Physical Address of Applicant Headquarters
  - e. Mailing Address of Applicant Headquarters (if different)
  - f. Name of Contact Person
  - g. Title of Contact Person
  - h. Phone of Contact Person
  - i. Fax of Contact Person (if available)
  - j. Email of Contact Person
  - k. Name of Authorized Signatory Person
  - 1. Title of Authorized Signatory Person
  - m. Email of Authorized Signatory Person
- 2.2. **Proof of SAM.gov registration.** Provide a copy or printout of SAM.gov registration. This is required for all entities receiving federal funds.
- 2.3. **Supplemental Questions**. Provide a written response to the questions outlined in Appendix A.
- 2.4. **Evaluation and Monitoring.** Describe ability to evaluate efforts and provide process and outcome data to the CDPP. This section must include the methods, techniques, and tools used to: 1) monitor and track impact on patient populations (e.g. number of patients screened using a SDOH tool, number of patients referred to a lifestyle change program, number of patients referred to a social needs service etc.); 2) ensure performance measure data is collected and reported in a timely and accurate manner; and 3) compile a final report summarizing the implementation and final outcomes of the overall program.

2.5.**Budget Narrative.** Use the template provided to describe and justify your proposed expenses. Expand as needed.

<b>Expense Category</b>	Item Description	Justification	Estimated Cost for Term of Grant
Personnel Salaries			\$
Fringe Benefits			\$
Contractual Costs			\$
Supplies			\$
Other (specify)			\$
		Total Direct Cost:	\$
		Indirect (Administrative Costs not to exceed 10% of the total grant award)	\$
		Total Cost:	\$

2.6. **Certificate of Authorization.** Complete the certification of authorization found on the next page.

### **CERTIFICATION OF AUTHORIZATION**

By submission of an application, the proposer certifies:

The person signing this proposal certifies that he/she is authorized to represent the company and is legally responsible for the decision as to the supporting documentation provided as a result of this application.

Proposer will comply with all federal and state regulations, policies, guidelines and requirements.

I certify to the best of my knowledge that the information contained in this application is correct, and solely the work of this agency. If awarded funding under this grant, I certify that this project will be conducted in accordance with funding source requirements and the assurances provided within this application.

I have been authorized by the agency's governing body to submit this application.				
Signature of Authorized Agent	Date			
Name of Authorized Agent				

# APPENDIX A: Supplemental Questions

Question	Applicant Answer
What EHR does your healthcare system use?	
Is your organization affiliated with a larger healthcare system's EHR (e.g., Banner, UC Health, Inter-Mountain Health etc.)?	
If you answered yes to the above question, is the larger system already connected to a social needs platform (e.g., UniteUS or Find Help etc.)?	
Is your healthcare system connected to the state health information exchange, Wyoming Frontier Information (WyFI)?	
Is your organization already using a SDOH screening tool? If yes, which one?	
If you answered no to the above question, does your EHR have the ability to integrate the PRAPARE Tool or similar SDOH screening tool?	
If you are already using an SDOH screening tool, who in your healthcare system is screening patients <b>and</b> how frequently is screening being done?	

How many SDOH screenings have been done in your healthcare system in the last 6 months?	
What CDC recognized lifestyle change program will your EHR refer eligible patients to? Examples of lifestyle change programs include:  • Diabetes Self-Management and Education Support • Self-Measured Blood Pressure Programs • Cent\$ible Nutrition • Supplemental Nutrition and Assistance Program and Education (SNAP-ED) • Expanded Food and Nutrition Education Program (EFNEP) • Curves Complete • Weight Watchers • Taking Off Pounds Sensibly (TOPS) • HealthyU	
Please name the clinic champion that will be supporting the implementation of this grant.	

# APPENDIX B: Weighted Evaluation Factors

Component of Application	
Cover Sheet and proof of SAM.gov registration	10
Appendix A: Supplemental Questions	40
Evaluation and Monitoring	30
Budget Narrative	20
Total Possible Points	100