# request for applications
## safety net integration 2012

**Important Dates**

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| Applications Due: | By 5 pm, Friday, September 14, 2012 |
| Informational Conference Call: | August 29, 2012, 10:00 am-11:00 am |
| | Dial-in number: (800) 391-1709 |
| | Bridge number: 390558 |

Notification of Grant Awards:                December 2012

**How to Apply:**                                http://www.cybergrants.com/BSCF/SNI_2012

**Eligibility**

- California safety net healthcare providers working together to improve the integration of care delivery to better coordinate care for low-income populations.
- Nonprofit, governmental, or tribal healthcare organizations, as listed on page 3
- Must comply with other eligibility requirements on page 3

**Contact Information**

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|---|---|
| Content Questions: | Technical Questions: |
| | |
| Richard Thomason | Gwyneth Tripp |
| Program Officer | Grants Administrator |
| (415) 229-5292 | (415) 229-6149 |
| richard.thomason@blueshieldcafoundation.org | gwyneth.tripp@blueshieldcafoundation.org |

# 1.    Background

> **Blue Shield of California Foundation's Mission:** Improve the lives of Californians, particularly underserved populations, by making health care accessible, effective, and affordable for all Californians, and by ending domestic violence.

To help fulfill our mission, Blue Shield of California Foundation engages in grantmaking and program activity to support the expansion of coverage options for low-income Californians and to strengthen the ability of the healthcare safety net to provide access to quality care for this population.

The Foundation's efforts to strengthen the healthcare safety net in California focus on three broad areas: 1) supporting community health centers with core operating support grants that provide flexible funding for meeting critical needs; 2) providing targeted assistance to community health centers and consortia to transform care delivery through leadership training, research, and project grants; and 3) offering grants and technical assistance to a range of safety net stakeholders, including county governments, public hospitals and other providers, to improve the integration of safety net delivery systems, including through the development of county-based Low Income Health Programs (LIHPs).

In this Request for Applications (RFA), the Foundation is pleased to announce a new grantmaking opportunity for projects that will improve the integration of safety net delivery systems. We strongly believe that a more systematic approach to providing health care to safety net populations will improve the coordination of care for safety net patients and better utilize existing healthcare spending.

California's healthcare safety net, like the rest of the healthcare delivery universe, is not an organized "system" of care. Local and regional healthcare providers working in silos have limited ability to share patient information or coordinate the full range of primary care, specialty care, inpatient care, behavioral health, and social services needed to keep a person healthy. Health information technology can bridge these gaps, but too often safety net providers have incompatible systems or lack necessary interconnections to share patient information. Safety net populations in particular suffer the most adverse health consequences from this fragmentation due to limited financial resources or a lack of health insurance to help them bridge gaps in care systems.

The enactment of the Patient Protection and Affordable Care Act (ACA), the implementation of California's Section 1115 Medicaid waiver (the "waiver"), and the shift towards value-based purchasing by public and private payers create new opportunities to develop strategies that improve integration among safety net providers. They offer new tools and incentives to help safety net providers work together to coordinate care, such as through the creation of Low Income Health Programs and the development of Accountable Care Organizations. Moreover, the ACA promises to extend coverage to more than 3 million uninsured Californians in 2014 through the

expansion of Medi-Cal eligibility and the creation of the Health Benefit Exchange. Many uninsured individuals who now access care through safety net providers will, when they get coverage, have the option to seek care outside the safety net for the first time. This dynamic will create both an incentive and pressure for safety net providers to improve care delivery in order to continue being the provider of choice for their patients.

BSCF believes that strengthening integration of the safety net delivery system is critical to providing access to quality care for low-income populations. Consequently, we want to support safety net providers in taking full advantage of the opportunities provided by the waiver and the ACA to promote organized systems of care. Through this RFP, BSCF seeks to fund projects to improve the integration of care delivery among county-level healthcare safety net providers to better coordinate care for low-income populations. In this grantmaking we also seek projects that hold promise to make the delivery of care by safety net providers more cost-effective. We encourage applicants to propose projects that will restrain healthcare cost growth through strategies that build linkages across the safety net to provide the right care in the right place at the right time. We recognize creating an integrated safety net delivery system is a process that takes time, but we believe that stakeholders in a number of counties are ready to make meaningful steps towards greater integration.

## 2.    Eligibility

To be eligible, an applicant must represent a coalition of local safety net providers working together on an integration project. Eligible applicants include:

- Community health centers that provide comprehensive primary care;
- Tribal health centers;
- Regional community health center consortia;
- County health or mental health agencies;
- County hospital systems;
- Local initiative health plans or county organized health systems;
- Healthcare districts;
- Private nonprofit safety net hospitals or systems; and
- Community based organizations with deep involvement in the safety net healthcare system.

**We strongly prefer to receive only one proposal per county.** We encourage safety net providers within a county to collaborate on a joint proposal. Proposals from multi-county or regional applicants will be considered.

Applicant must meet BSCF's organizational requirements:
- Have a mission consistent with the mission and goals of Blue Shield of California Foundation
- Be a nonprofit and tax-exempt organization under 501(c)(3) of the Internal Revenue Service Code (IRC) and defined as a public charity under 509(a) 1, 2, or 3 (types I, II, or a functionally integrated type III) or be a governmental, tribal, or public entity
- Have a reputation for credibility and integrity
- Primarily serve Californians
- For past and current BSCF grantees, meet current grant agreement requirements, and be up-to-date on all required reports from previous grants, as applicable

BSCF has also recently released an RFA seeking grant proposals from community health center consortia for projects to help community health centers improve their ability to collect, analyze and use data to improve clinical quality and operational effectiveness. If an applicant agency is applying to BSCF for funding through both the consortium and safety net integration RFAs, it should address how the proposed projects will complement and/or work with one another.

## 3.    Use of Funds

This RFA seeks proposals that would improve the integration of care delivery among healthcare safety net providers in a county to better coordinate care for low-income populations. Highest priority will be given to projects that present both a strategy for strengthening the integration of care across providers and for making care delivery more cost effective. Examples of such projects may include efforts to reduce hospital readmissions by improving transitions of care across safety net hospitals and health centers; efforts to reduce unnecessary emergency department utilization through linkages between hospitals and ambulatory care providers; implementation of care models to better integrate behavioral health and primary care; or efforts to develop information systems to allow the sharing of patient data between safety net hospitals, community health centers, county primary care clinics and other safety net providers. We seek proposals that will begin implementation within the grant term but will consider proposals that include a planning phase.

Examples of the types of projects eligible for this grantmaking include, but are not limited to:

- Development and implementation of a safety net accountable care organization to be an integrated delivery network in a region or county;
- Development and implementation of new payment models to encourage care coordination by and integration of safety net healthcare providers;
- Support of countywide collaboratives, comprised of diverse stakeholders including community health centers, hospitals, private providers, and county health and human services departments that are actively planning for and responding to integration opportunities created through the ACA and the Section 1115 waiver;
- Efforts to strengthen the integration of behavioral health and primary care within the local safety net, with a focus on planning for or implementation of systems redesign;
- Development and implementation of shared systems for specialty care consultation, referral or treatment;
- Implementation of aspects of a patient centered medical home that strengthen integration across settings of care, such as care coordination between community health centers and hospitals;
- Development and implementation of health information exchange capabilities to enable health centers, hospitals, and other community and county based providers to more closely coordinate care for low-income populations; and
- Opportunities to expand access to and better coordinate care for hard-to-serve populations, including for example the undocumented, populations still uninsured after ACA implementation, and homeless individuals.

## 4.    Grant Size and Term

**Grant Size:**    Proposals for up to $250,000 will be considered, with an estimated 5 to10 grants to be awarded through this RFA. Grant award amounts will vary depending on the number of qualified applicants and the scope of the proposal and population being served. Submission of a proposal does not guarantee funding.

**Grant Term:**   Up to 12 months, starting January 1, 2013

# 5.      Proposal Evaluation

In evaluating proposals, we will look for a demonstration of:

- Compelling vision and leadership among local safety net stakeholders to create a better integrated system of care;
- History of strong collaboration among safety net providers and stakeholders, including an existing forum in which safety net providers are already meeting and discussing issues of mutual concern, and/or a serious commitment by safety net providers to develop this forum;
- Commitment to the project by local safety net stakeholders;
- Implementation of a meaningful strategy to improve integration of different safety net providers into a more efficient and cost-effective delivery system for low-income populations;
- Involvement of community health centers, community health center consortia, and community health center leadership in delivery system integration;
- Commitment to achieve Triple Aim goals to improve the health of a population, improve quality and the patient experience of care, and lower the per capita cost of care; and
- Quality and clarity of project objectives, work plan and budget.

Review and due diligence on the proposals will be conducted September through November and applicants will be notified of their status by mid-December.

## 6.    How to Apply

1.  Apply through our online grant system using the following custom link:

    http://www.cybergrants.com/BSCF/SNI_2012

    **Note:** Applications must be submitted using the link above. DO NOT submit through the Foundation's website

2.  Enter registered grantseeker email and password to login or register as a new grantseeker following the instructions at the top of the page.

    **Note:** Only one grantseeker can been connected to each application.

3.  On the Welcome page, scroll to the bottom of the page and click:
    **» Start a New Application «**

4.  After clicking the link, you will be directed to the application. There is a navigation bar at the top of each screen to allow for easy toggling between sections.

    **Notes:**
    - The name of this funding opportunity should appear above the navigation bar.  If you do not see it, you are in the incorrect application. Exit the system and login through the link above.
    - Update organizational and contact information in the first two sections
    - Some fields in the application are pre-populated and cannot be edited

5.  Click the "Submit" button on the preview application page to submit the application. You will receive an application receipt via email confirming your submission.


**Application Information**

In addition to the core application, applicants will be asked to provide two references from partnering safety net organizations. These references may be contacted as part of due diligence for the proposal.

## 7. Contact and Conference Call Information

**Content Questions:** For questions related to eligibility for this grantmaking or to the content of the application, contact:

Richard Thomason
Program Officer
(415) 229-5292
Richard.thomason@blueshieldcafoundation.org

**Technical Questions:** For questions related to the online grants system or application process, contact:

Gwyneth Tripp
Grant Administrator
(415) 229-6149
gwyneth.tripp@blueshieldcafoundation.org

**Informational Conference Call**

BSCF will host an optional informational conference call on
**August 29, 2012, 10:00 am-11:00 am**

Dial-in number: (800) 391-1709
Bridge number: 390558

During the presentation at the beginning of the call, all caller lines will be muted. Questions will be addressed during the Q & A portion of the call following the presentation.

Instructions for the Q & A Period:

- BSCF staff will announce when the Q & A is beginning (hold your questions until this time)
- To pose a question, press 5* and you will be placed in the queue
- When you hear an announcement that your line has been "unmuted" it is your turn to speak
- Introduce yourself and your agency name
- To be removed from the queue press 5* again

## 8.    Key Dates

**August 16, 2012**              Request for Applications Released

**August 29, 2012**              Informational Conference Call (optional)
10:00 am – 11:00 am          Dial In #: (800) 391-1709
                                          Conference Bridge #: 390558

**August 31, 2012**              Minutes from conference call sent to potential
                                          applicants

**September 14, 2012**        **Applications due**
5:00 pm

**September to**                  Applications reviewed
**November, 2012**              Due diligence and follow-up activities (as necessary)

**December 2012**              Notification of grant decisions

**January 1, 2013**              Start date for selected projects