Ohio Department of Medicaid/
Ohio Medicaid Technical Assistance and Policy Program (MEDTAPP)
Healthcare Access Initiative

Phase 2-Round 1
Community Health Worker Program

Request for Proposals

Application Due Date:
May 15, 2014

Application Release Date:
April 15, 2014

Request for Proposals Project Contact:
Kyrsten Chambers
Healthcare Policy and Strategy Specialist
(614) 366-0539
MEDTAPPHCA@osumc.edu

Additional HCA Initiative Team Members:
Shannon Ginther, JD
Director of College and University Relations

Amy Peters, MPH
Program Manager

Tracie Sinsheimer
Program Coordinator
Executive Summary

The purpose of the MEDTAPP Healthcare Access (HCA) Initiative is to support the development and retention of additional healthcare providers with skills and competencies to serve the Medicaid population using emerging healthcare delivery models and evidence-based practices, such as health homes and integrated behavioral and physical health service delivery. This funding opportunity provides up to $1.5 million in additional funds over a 13 month project period (June 1, 2014-June 30, 2015) to achieve the goals of this initiative.

This funding opportunity solicits proposals from Ohio-based Academic Medical Colleges (AMC) and health sciences colleges, universities, and institutions participating in the MEDTAPP Healthcare Access Initiative. Other Ohio institutions (nursing schools, etc.) may partner with an eligible institution to apply but may not be the lead applicant.

Through this funding opportunity, the MEDTAPP HCA Initiative seeks proposals to develop, enhance, and/or integrate certified Community Health Worker (CHW) Programs focused on attracting, training, and retaining future healthcare providers to serve Ohio’s Medicaid population. Specifically, the MEDTAPP HCA Initiative CHW Program seeks proposals designing and/or implementing innovative, integrated team-based curriculum in partnership with current MEDTAPP HCA projects and providing CHW learners with innovative, team-based placement site opportunities focused on serving Ohio’s Medicaid population.

Up to $1.5 million in federal financial participation (FFP) funds are to be awarded to funded applicants by June 1, 2014 with an anticipated project start date of June 1, 2014. FFP funds will be awarded as follows:

- Up to $500,000 in SFY 14 (June 1, 2014-June 30, 2014); and
- Up to $1,000,000 in SFY 15 (July 1, 2014-June 30, 2015).

Funds will be awarded through the application of a formula (see Attachment B).

Applicants are required to certify 51% of total allowable project costs each quarter through the identification of non-federal matching funds supporting the goals of this initiative.

Applicants may request FFP funds for the following expenses:

- Program direct costs (e.g., salaries, stipends or benefits for Principal Investigators, faculty, CHW learners, and MEDTAPP Scholars);
- Support for teaching, training, and technical assistance activities under this initiative for qualified faculty, CHW learners, and MEDTAPP Scholars dedicated to
improving access to and quality of care for the Medicaid population;
• Support for training program development; and/or
• Planning costs associated with building and/or refining comprehensive curriculum and/or partnerships with community placement sites.

The Ohio Department of Medicaid will select program awardees. The Ohio Department of Medicaid and the Ohio State University Office of Sponsored Programs reserve the right to terminate this initiative at any time, request revisions to or modifications of selected proposals, or initiate a new Request for Proposals.
Technical Assistance

Questions related to this Request for Proposals may be emailed to MEDTAPPHCA@osumc.edu.

Questions will be accepted until April 29, 2014, at 5:00 PM EST.

A copy of this Request for Proposals (RFP) and all questions and answers posed by potential applicants will be posted at: http://grc.osu.edu/currentfunding/
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1. Funding Opportunity Description

MEDTAPP Overview

Section 1903(a) of the Social Security Act allows the federal government to participate financially in state Medicaid programs in such amounts "found necessary by the Secretary for the proper and efficient administration of the State (Medicaid) plan." Under this MEDTAPP funding umbrella, federal funding eligibility requires that funded activities contribute to the efficient and effective administration of the Medicaid program. Faculty and staff at Ohio's colleges and universities possess varied and substantial expertise that can be leveraged to increase the efficiency and effectiveness of Ohio's Medicaid program.

The Ohio Department of Medicaid (ODM) seeks partnership opportunities with Ohio's colleges and universities to implement strategies to increase Ohio's network of providers serving the Medicaid population. ODM contracted with the Ohio Colleges of Medicine Government Resource Center (GRC) to provide procurement and project management services for the MEDTAPP program, including the MEDTAPP Healthcare Access Initiative.

MEDTAPP Healthcare Access (HCA) Initiative Overview

The MEDTAPP HCA Initiative partners with Ohio's colleges and universities to support the development and retention of additional healthcare practitioners with skills and competencies to serve the Medicaid population using emerging healthcare delivery models and evidence-based practices, such as health homes and integrated behavioral and physical healthcare service delivery. This initiative specifically aligns with established, successful programs; leverages existing resources; and engages academic and community experts.

The MEDTAPP HCA Initiative's focus includes but is not limited to the following known Medicaid Professional Needs Areas: Child and Adolescent Psychiatry, Community Psychiatry with a Geriatric and/or Integrated Behavioral Health/Primary Care Focus, Pediatrics, Family Practice, Advanced Practice Nursing, Dentistry, Community Health Workers and/or Care Coordinators, and other underrepresented healthcare professionals (please specify).

Currently, the MEDTAPP HCA Initiative funds 15 projects at 9 Ohio colleges and universities through June 30, 2015 to support the development and retention of additional healthcare practitioners to serve Ohio's Medicaid population. More information regarding
current projects is available at the following link: http://grc.osu.edu/medicaidpartnerships/healthcareaccess/index.cfm

This funding opportunity provides up to $1.5 million in additional FFP funds over a 15 month project period (June 1, 2014-June 30, 2015) to achieve the goals of this initiative and will be awarded as follows:

- Up to $500,000 in SFY 14 (June 1, 2014-June 30, 2014); and
- Up to $1,000,000 in SFY 15 (July 1, 2014-June 30, 2015).

This funding opportunity solicits proposals from Ohio-based Academic Medical Colleges (AMC) and health sciences colleges, universities, and institutions participating in the MEDTAPP Healthcare Access Initiative. Other Ohio institutions (nursing schools, etc.) may partner with an eligible institution to apply but may not be the lead applicant.

Through this funding opportunity, the Ohio Department of Medicaid’s MEDTAPP HCA Initiative seeks proposals to develop, enhance, and/or integrate certified Community Health Worker (CHW) Programs focused on attracting, training, and retaining future healthcare providers to serve Ohio’s Medicaid population. Specifically, the MEDTAPP HCA Initiative CHW Program seeks proposals designing and/or implementing innovative, integrated team-based curriculum in partnership with MEDTAPP HCA Initiative projects and providing CHW learners with innovative, team-based placement site opportunities focused on serving Ohio’s Medicaid population.

The MEDTAPP HCA Initiative CHW Program will assist the Ohio Department of Medicaid with the efficient and effective administration of the Medicaid program by extending current MEDTAPP HCA Initiative project curriculum to:

- Integrate a CHW interdisciplinary education and training component into existing HCA program curriculum;
- Establish community partnerships to place and train CHWs in high volume Medicaid practice sites that utilize team-based provider training models;
- Retain high quality, certified CHWs to serve in high volume Medicaid sites; and
- Launch a greater number of Ohio Board of Nursing approved CHW training programs2 throughout Ohio focused on serving Ohio’s Medicaid population.

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2 *The Ohio Board of Nursing certifies CHW training programs. All programs should receive written notice of certification no more than 120 days from the Ohio Board of Nursing’s receipt of the application. Programs are certified for two-year increments. The application and more information about CHW certification and certification programs can be found at the website: http://www.nursing.ohio.gov/forms.htm#CommHealthForms.*
Eligible institutions are encouraged to propose new programs and/or expansion of existing programs that focus on interdisciplinary healthcare access strategies and community partnerships to train and place additional high-quality CHWs dedicated to serving the Medicaid population in emerging healthcare delivery models.

This initiative seeks early results (provider placements in high-volume Medicaid Professional and Geographic Needs Areas utilizing emerging healthcare delivery models) on or before June 30, 2015.

Each funded MEDTAPP HCA Initiative CHW Program proposal will utilize innovative training methods and effective retention strategies to design a model that includes well developed and effective:

1. Trainee selection criteria;
2. Trainee retention strategies;
3. Placement site strategies;
4. Structured and innovative CHW curriculum;
5. CHW curriculum certification processes; and

A proposal’s overall success will be measured by its ability to effectively place and retain CHWs demonstrating academic excellence and competency to serve Ohio’s Medicaid population. Proposals will be heavily weighted on the quality of the proposal’s trainee retention strategies and actual number (FTEs) of CHW learners trained and committed to serving the Ohio Medicaid population post-training and certification.

ODM will use a formulary to award funds to support comprehensive CHW teaching, training, and technical assistance activities under this initiative to improve healthcare access and quality for the Medicaid population. This initiative’s primary intent is to support training and field placement of CHW learners\(^3\) and MEDTAPP Scholars.\(^4\)

Funding may also support training program development, training of faculty, and other costs associated with training additional CHWs dedicated to serving Ohio’s Medicaid population using emerging healthcare delivery models. However, no more than 25% of total funds will be awarded for proposed activities outside of the funding opportunity's primary intent.

\(^3\) "Learner" is defined as a CHW student in training or in-career CHW: (1) participating in the MEDTAPP HCA initiative CHW Program; (2) receiving pre- or post-CHW certificate training advancing their understanding of providing interdisciplinary, team-based care in high volume Medicaid sites; and (3) committing to serve the Ohio Medicaid population after training.

\(^4\) Throughout this Request for Proposals, “MEDTAPP scholar” is defined as a provider who is: (1) emerging from his/her formal training to be placed in the CHW Medicaid Professional and Geographic Needs Areas (see definitions in Sections 1 and 6); AND (2) participating in the MEDTAPP Healthcare Access Initiative.
Subject to the availability of funds and discretion of the Ohio Department of Medicaid and Ohio State University Office of Sponsored Programs, funded projects may be renewed and new projects may be funded.

2. Funding Mechanism

Type of Award

Federal Financial Participation (FFP) funding will serve as the funding source for 49% of this initiative. Applicants are required to provide and certify 51% of total allowable project costs through the identification of non-federal matching funds supporting the goals of this initiative.\(^5\)

Funding Overview

This funding opportunity provides up to $1.5 million in additional FFP funds over a 15 month project period (June 1, 2014-June 30, 2015) to achieve the goals of this initiative and will be awarded as follows:

- Up to $500,000 in SFY 14 (June 1, 2014-June 30, 2014); and
- Up to $1,000,000 in SFY 15 (July 1, 2014-June 30, 2015).

Funds will be awarded through the application of a formula (See Attachment B). The anticipated notice of award date is June 1, 2014. The budget start date for the project period is June 1, 2014.

The number of projects funded depends upon the number and quality of applications received. Each proposal must clearly demonstrate that the CHW Medicaid Professional Needs Area is being addressed. Total payments to each project cannot exceed the approved budget for each selected project.

Subject to the continued availability of MEDTAPP funds, projects funded under this initiative may be renewed after June 30, 2015.

ODM will select program awardees. ODM and the Ohio State University Office of Sponsored Programs reserve the right to terminate this initiative at any time, request revisions/modification of selected proposals, or initiate a new Request for Proposals.

\(^5\) Universities are required to provide the additional 1% matching funds to be used by GRC to cover project management costs associated with this project.
Funding Uses

Funds may be used to:

- Pay program direct costs (e.g., salaries, stipends or benefits for Principal Investigators, faculty, CHW learners, and MEDTAPP Scholars);
- Support teaching, training, and technical assistance activities under this initiative for qualified faculty, CHW learners, and MEDTAPP Scholars dedicated to improving access to and quality of care for the Medicaid population;
- Support training program development; and
- Support planning activities eligible for funds, including applicant outreach, engagement and coordination to build comprehensive academic and community partnership networks.

Funding Restrictions

Funds must not be used for:

- Capital expenses;
- Supporting delivery of billable healthcare services;
- Establishing loan repayment programs;
- Continuing Education programs; or
- Refinancing existing healthcare access programming.

For additional guidance related to appropriate use of MEDTAPP Healthcare Access Initiative funds, see Attachment A: Center for Medicare and Medicaid Services Federal Financial Participation Guidelines for MEDTAPP.

Funding Formulary

The funding formulary and monetary awards to selected applicants will be based on the number of CHW learners and MEDTAPP Scholars the program attracts, trains, and places; additional funds may be awarded for faculty supervision, teaching, and training costs, training program development, and other program costs. Planning dollars may also be awarded to applicants to build and refine comprehensive community partnerships.

The initiative’s initial focus is on placements of CHW learners and MEDTAPP Scholars in Medicaid Geographic Needs areas. This includes building CHW programs to promote and expand the use of CHWs in health promotion and care coordination roles.
Proposals should include a scope of work that can be accomplished within the level of funding noted in this RFP. Proposals that exceed this amount will be rejected. The evaluation of proposals will consider the quality and scope of the proposal based upon these limits. There will not be any evaluation credit given for budgets that are less than the amount noted in the Funding Overview section. When proposing activities and requesting funding for the June 1, 2014-June 30, 2015 project period, applicants must submit a detailed budget narrative (using the guidance in Attachments A&B) and budget spreadsheet, using the provided template.

Budget Spreadsheet Template: [http://grc.osu.edu/currentfunding/](http://grc.osu.edu/currentfunding/)

**Cost Sharing/Matching Requirements**

Funding is 49% Federal Financial Participation (FFP) and 51% qualified non-federal funds. Typical qualified non-federal funds include university faculty and facility support, and unrecovered facilities and administration costs. State general revenue funds, contributions from private entities, and bona fide donations may also be used as sources of qualified non-federal funds, where appropriate. Non-federal funds identified under this initiative may not be used as match for other federal projects. In addition, identified non-federal funds must align with the providing entity’s program goals and the goals of this initiative. Colleges and universities have flexibility to submit proposals that best leverage available funds/resources and community partnerships to provide the non-federal matching funds for this initiative.⁶

Examples of non-federal match include:

- State General Revenue Funds (GRF);
- Other non-federal loan program dollars;
- Qualifying private foundation dollars; and
- Various levy and/or local funding sources.

**Funding Guidance and Examples**⁷

- A public institution or public provider may use non-federal public funds to draw down federal MEDTAPP funds when the public funds are: (1) specifically designated to support the MEDTAPP HCA Initiative; (2) directly disbursed to; and (3) expended

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⁶ Selected applicants will be required to certify non-federal match sources. See Attachments A&B and the budget spreadsheet for further budget development assistance.

⁷ These examples are not intended to be an exclusive list.
by a public institution/public provider as a public expenditure related to this initiative.

- An applicant must not use federal funds (e.g., Graduate Medical Education - GME) as match to draw down federal MEDTAPP funding.
- The MEDTAPP HCA Initiative funds may be used to support a university faculty member's teaching, training, and technical assistance activities related to the initiative. Specifically, for a provider organization that bills Medicaid for services, MEDTAPP funds may be used to support the faculty member for time spent teaching, training and providing technical assistance under this initiative (e.g., for a faculty member who spends 80% of his/her time seeing patients and billing for services and 20% time providing teaching, training and/or technical assistance under this Initiative, MEDTAPP funds may be used to support the 20% teaching, training, and technical assistance time and indirect costs related to these activities).

For further information, please see Attachment A: Center for Medicare and Medicaid Services Federal Financial Participation Guidelines for MEDTAPP and Attachment B: Project Formulary Guidance and Proposed Budget.

**Other Funding Limitations**

Applicants proposing to use funds to refinance existing university and/or community healthcare access activities will not be funded.

Any applicant failing to meet the requirements referenced in this funding opportunity will not be considered.

All awards under this funding opportunity are subject to the continued availability of funds.

3. **Eligibility Information**

**Eligible Applicants**

Eligible applicants include Ohio-based Academic Medical Colleges (AMC) and health sciences colleges, universities, and institutions participating in the MEDTAPP Healthcare Access Initiative. Other Ohio institutions (nursing schools, etc.) may partner with an eligible institution to apply but may not be the lead applicant.
4. **Resources Provided by the State of Ohio**

As opportunities become available, ODM may provide the following additional assistance and potential resources to selected applicants:

- Quality improvement training opportunities for CHW learners and MEDTAPP Scholars;
- Events for funded projects to share best practices;
- Alignment opportunities with applicable Ohio Office of Health Transformation/Medicaid Budget priorities; and/or
- Outreach, leverage, and promotion of community and inter-university partnerships.

5. **Initiative Requirements**

**Project Deliverables**

In each proposal, applicants are expected to identify specific deliverables to be achieved under this funding opportunity along with target completion dates for each deliverable.

**As part of the applicant’s deliverables, proposals must include a description of responsibilities or duties of funded CHW learners and MEDTAPP Scholars. Descriptions must specifically address how the funded individuals contribute to the MEDTAPP Healthcare Access Initiative.**

**CHW Learner Responsibilities:**

CHW learners eligible to participate in the program must demonstrate the ability to complete all components of the MEDTAPP HCA Initiative CHW Program, including but not limited to:

- Successfully completing academic and field training per established CHW curriculum;
- Maintaining the program quality, expectations, and relationships with all parties;
- Successfully obtaining CHW certification from the Ohio Board of Nursing (Applicable to End-of-Pipeline Trainees);
- Maintaining security and confidentiality of patient protected health information;
- Providing feedback to assigned preceptor on placement site experiences and the overall program;
- Completing other duties as assigned by the advisor/preceptor for the placement site; and
- Committing to serving Ohio’s Medicaid population by agreeing to the following retention requirements:
o CHW learners receiving financial incentives from the MEDTAPP HCA Initiative must dedicate a specified amount of employment in a high-volume Medicaid site after obtaining CHW certifications and completing training; and

o CHW learners receiving training benefits from the MEDTAPP HCA Initiative must complete quality improvement projects or commit to serve the Ohio Medicaid population for a period of time equal to or greater than the training benefit received. Quality improvement projects must be:
  ▪ Completed outside of MEDTAPP HCA Initiative CHW Program duties and responsibilities; and
  ▪ Related to the MEDTAPP HCA Initiative CHW Program classroom and field curriculum.

Selected Applicant Institution Responsibilities:
Applicant institutions selected to participate in the MEDTAPP HCA Initiative CHW Program will be responsible for providing the overall project management and fiscal administration for their individual projects, including:

• Developing, designing, and implementing proposed CHW program components as part of current MEDTAPP HCA Initiative curriculum;
• Fulfilling all CHW certification standards as detailed in OAC Rule 4723-26-13 and applying for program accreditation, including establishing and maintaining proper approval with the Ohio Board of Nursing by completing the CHW Training Program Approval Application;
• Establishing collaborative relationships with community placement sites to provide a variety of meaningful learning experiences for trainees; and
• Providing sufficient cost share and meeting the MEDTAPP HCA Initiative requirements outlined in this RFP.

Deliverables must also address Performance Measures (see pp. 15-16).

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http://codes.ohio.gov/oac/4723-26-13
Performance Measures

As a condition of continued project funding, each selected applicant will be required to address the following performance measures:

(1) **Identify Targeted Medicaid Professional Need Area Addressed, Education/Training Levels, Placement Sites, and Number of Participants:**

- Identify number of participants in the program by:
  - Year in educational program or training.
- Identify placement site for each participant; and
- Identify number of:
  - Participants trained between June 1, 2014-June 30, 2015; and
  - New graduates placed between June 1, 2014-June 30, 2015.

(2) **Identify Innovative Care Delivery Model(s) Used to Educate Participants:**

- Provide evidence of best practice integration into curriculum and training models; and
- Provide project plan from June 1, 2014-June 30, 2015.

(3) **Identify Training Program Development and Field Placement Strategies for Participants:**

- Describe relationships with CHW placement site(s), including community, Federally Qualified Health Centers, and/or institutional settings serving a high volume of the Medicaid population, identifying these sites specifically.
- Identify hours per week participants are placed in settings.
- Provide evidence of exposure to innovative care delivery models within healthcare placement sites.

(4) **Identify Program’s Overall Impact on the Ohio Medicaid Workforce**

- Provide number and percentage of program participants working at least part time providing care to the Ohio Medicaid population in one of the following settings in Ohio:
  - High volume Medicaid population provider sites;

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9 In subsequent years, funded programs will be required to demonstrate ongoing program retention figures (e.g. number of program participants continuing to serve Medicaid populations over time).
6. **Proposal Evaluation Criteria**

**Phases**

The proposal evaluation process may consist of up to four distinct phases:
1. The initiative review of all proposals for defects;
2. The proposal evaluation committee’s assessment of proposals;
3. Requests for more information (interviews, responses to written questions, presentations, and/or demonstrations); and

**Evaluation of Proposals**

Proposal evaluations will be based on the following:
- Feasible plans to establish an Ohio Board of Nursing-approved CHW training program in Ohio\(^ \text{10} \) that builds on funded MEDTAPP HCA project curriculum and training activities;
- Proposed strategies and activities to recruit CHW learners;
- Existing and emerging interdisciplinary and community training partnerships;
- Operable placement and retention strategies;
- Delineated participant responsibilities to assist with training CHWs in emerging healthcare models and focus on overall care transformation strategies during placement; and
- Applicant’s strategy to build on university and community’s existing and emerging MEDTAPP HCA Initiative efforts from one program year to the next.

**Required Selection Criteria**

- Demonstration of measurable increases in the number of CHW learners placed in the field by June 30, 2015 and appropriate budget justification for each provider placement (see Attachments A&B for further guidance);
- Use of strategies to rapidly engage CHW learners.

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\(^{10}\) See footnote on page 7.
Applicants may propose strategies to engage CHW learners at the end of their formal CHW training (i.e. MEDTAPP Scholars). Applicants may utilize rapid training programs and on-going training activities to further develop participants’ integrated CHW healthcare delivery skills focused on serving the Medicaid population.

- Program readiness and use of innovative strategies to provide participants with Medicaid-focused, relevant, and integrated emerging healthcare delivery education and training;
- Program focus on healthcare access development, training, and retention in Ohio’s Medicaid Geographical Needs Areas:
  - Health Professional Shortage Area (HPSA) designations in Ohio (http://hpsafind.hrsa.gov/);
  - Placement sites serving a high volume of the Medicaid population in Ohio (greater than or equal to 30% of total patient population); or
  - Placement sites serving a combination of Medicare/Medicaid (duals), Medicaid, and uninsured populations in Ohio (greater than or equal to 50% of total patient population).
- Use of innovative, proven strategies to retain healthcare professionals dedicated to serving Ohio's Medicaid population;
- Demonstration of stability and sustainability to build on-going recruitment and placement in subsequent program years;
- Demonstration of integrated and/or interdisciplinary training practicum based on best practice models and community partnerships;
- Affiliation/partnership with healthcare access placement sites; and
- Provision of non-federal matching funds for program activities.

Optional Selection Criteria

Priority points will be awarded to applications addressing the following:
- Expansion of CHW programs already in existence and demonstrating results;
- Program’s comprehensive approach to recruitment, training, and retention;
- Program’s partnership with sites in Ohio with existing/pending NCQA PPC PCMH Certification that serve a high volume of the Ohio Medicaid population;
- Program’s partnerships and other collaboration (across disciplines, departments, schools), including community collaboration; and
- Program’s partnerships with Federally Qualified Health Centers and other safety net providers in Ohio.
In the proposal evaluation phase, the committee will rate proposals based on the criteria and weight assigned to each component. See Attachment C for MEDTAPP HCA Selection Criteria.

7. Application Submission Information

Content and Form of Application Submission

Responses must address all aspects of this Request for Proposals and should be submitted in the following order:

- Proposal Cover Letter
- Proposal Face Page
- Proposal Table of Contents
- Proposal Project Summary
- Proposal Narrative
- Proposal Budget and Budget Narrative
- Proposal Organization Capacity
- Proposal Staff Qualifications and Resumes
- Proposal Attachments

Further explanation related to each topic area is below.

- Cover Letter

The cover letter must be in the form of a standard business letter on letterhead and must be signed by an individual authorized to legally bind the applicant. The cover letter will provide an executive summary of the applicant’s request for funds. The letter must also include:

1. The Applicant’s complete contact information including address, phone number, and website address;
2. A list of the people who prepared the proposal, including titles;
3. The name, phone number, fax number, and email address of a contact person who has authority to answer questions regarding the proposal;
4. A list of all subcontractors, if any, that the applicant will use on the work if the applicant is selected. If the subcontractor has not yet been identified, the information should be listed as “TBD” and must be submitted once selected;
5. For each proposed subcontractor, the Applicant must attach a letter from the
subcontractor, signed by someone authorized to legally bind the subcontractor, with the following included:
A. The subcontractor's legal status, tax identification number, and principal place of business address;
B. The name and phone number of someone who is authorized to legally bind the subcontractor to contractual obligations;
C. A description of the portions of the work the subcontractor will complete;
D. A commitment to complete the work if the applicant is selected;
E. A statement that the subcontractor has read and understood the RFP and will comply with the requirements of the RFP; and
6. A statement that the applicant’s proposal meets all the requirements of this RFP.

• **Proposal Face Page**

The proposal's face page should identify the title of the funding opportunity, applicant, contact person, and date of submission.

• **Proposal Table of Contents**

The proposal's Table of Contents should outline the proposal's contents by page number.

• **Proposal Project Summary (limit: 2 pages)**

The project summary must clearly indicate that the proposal addresses the CHW Medicaid Professional Needs Area. The summary must also describe project goals and objectives, organization and staffing, and the solution(s) that the applicant is offering to meet the specifications of this funding opportunity. The summary must describe the benefits of the proposal for the State of Ohio.

• **Proposal Narrative (limit: 30 pages)**

Using the information outlined in this Request for Proposals for guidance, the project narrative must clearly indicate that the proposal addresses the CHW Medicaid Professional Needs Area. The narrative should also provide ODM with a comprehensive framework, description of all aspects of the applicant's proposal, and logical implementation timelines and time-relevant milestones/deliverables. The narrative should be succinct, self-explanatory, and organized so that reviewers can understand the proposal's objectives and expected outcomes.
Proposal Budget and Budget Narrative

Each proposal shall include a budget spreadsheet and an accompanying budget narrative, detailing specific direct and indirect costs associated with the proposal. Applicants are requested to identify source(s) of non-federal match contributions. Please note that ODM limits administrative cost reimbursement to 10% of total project costs. Schools that have the Department of Health and Human Services approved Facility & Administration (F&A) rates are permitted to apply these rates for uncovered F&A costs and as a source of match. Note: Institutions are required to use their research F&A rate.

Proposals shall include costs for the entire project period (June 1, 2014-June 30, 2015).

See Attachments A and B for budget guidance and the MEDTAPP Healthcare Access Initiative budget spreadsheet attachment to be completed and included as part of each proposal.

The budget narrative shall demonstrate a 51% non-federal match. Matching funds should be clearly designated as direct financial, faculty support, or in-kind resources. The narrative shall also demonstrate that the federal financial support requested through the MEDTAPP Healthcare Access Initiative: (a) is intended to cover allowable expenses (those identified in Attachments A&B); (b) does not exceed limits identified in the Funding Formulary (described in Attachment B); and (c) is reasonable to support the activities described in the applicant’s proposal.

Proposal Organizational Capacity

Applicant Profile. Each proposal must include a profile of the applicant’s relevant experience. The profile must also include the applicant’s university or college affiliation, address, and telephone number; and any other background information that will help the evaluation committee gauge the ability of the applicant to fulfill the obligations of the Contract.

Equipment and Software Requirements. The applicant must demonstrate access to hardware and software capacity capable of performing the services in this RFP.

Proposal Staff Qualifications and Resumes

Each applicant must submit staff qualifications, resumes, four-page National Institutes of Health Biographical Sketches, or vitae for each individual included as part of the proposal.
• **Proposal Attachments**

Proposal attachments shall include third party funding commitment letters, university indirect rate agreements, and other information relevant to the proposal and not already included in the application.

• **Proposal Page Limitation**

Well-written, organized proposals are encouraged. The Project Summary section should be no longer than 2 pages, double spaced, 12 point font. The Project Narrative section should be no longer than 30 pages, double spaced, 12 point font, with pages numbered appropriately.

• **Proposal Submission Requirements**

Please submit 1 copy of your response in Microsoft Word format to MEDTAPPHCA@osumc.edu. Attachments such as resumes and vitae may be in PDF format. The document must include page numbers.

In addition, please submit 12 hard copies of your proposal to:

Kyrsten Chambers  
Healthcare Policy and Strategy Specialist  
Ohio Colleges of Medicine, Government Resource Center  
150 Pressey Hall, 1070 Carmack Rd  
Columbus, Ohio 43210

• **Proposal Submission Deadline**

All proposals must be postmarked and emailed by **May 15, 2014, at 5:00 PM Eastern Standard Time.**

8. **Project Reporting**

Selected applicants will be required to submit quarterly reports to GRC detailing completed activities related to the project’s deliverables and Performance Measures. The status of each deliverable identified in the selected applicant’s scope of work should be addressed. Project reporting forms will be provided at a later date to selected applicants. GRC will submit these reports to ODM.
Selected applicants may also be required to participate in quarterly meetings with GRC and ODM to review progress under this funding opportunity.

Thirty days prior to the close of State Fiscal Years 2014 (June 1, 2014) and 2015 (June 1, 2015), selected applicants will be required to submit a final report to GRC summarizing activities completed under this funding opportunity and addressing deliverables and Performance Measures. GRC will provide these reports to ODM.

**Project Invoices**

Selected applicants will be responsible for submitting quarterly invoices to GRC according to the guidelines provided by the Ohio State University (OSU) Office of Sponsored Programs and guidelines set forth for this initiative by the Ohio Medicaid program. Selected applicants will be required to certify to OSU that the cost share (non-federal match) is from appropriate non-federal sources. Selected applicants must provide OSU with records of those non-federal matching funds on their invoices or through other fiscal reports OSU deems appropriate.

All invoice submissions must include back-up documentation including itemized purchase receipts and all receipts from qualifying travel expenses.

If selected applicants use third party cost share funds, as the project proceeds, applicants must provide documentation from the third party that the funds have been expended.

**Evaluation**

It is anticipated that a formal evaluation will be part of this initiative. Further details related to the evaluation will be announced to selected participants. Selected applicants are expected to participate in this evaluation.

**Anticipated Announcement and Award Dates**

ODM plans to notify awardees before June 1, 2014.

ODM will select program awardees. ODM and the Ohio State University Office of Sponsored Programs reserve the right to terminate this initiative at any time, request revisions/modification of selected proposals, or initiate a new Request for Proposals.
9. **RFP Terms and Conditions**

The Ohio State University reserves the right to:
- Reject any or all proposals received in response to this RFP;
- Request clarification from any applicant on any or all aspects of its proposal;
- Cancel and/or reissue this RFP at any time;
- Retain all proposals submitted in response to this RFP; and,
- Invite some, all, or none of the applicants for interviews and further discussion.

**Provisions**

If any provisions in a resultant agreement are held to be invalid, void, or unenforceable, the remaining provisions shall continue in full force and effect without being impaired or invalidated in any way. Funding will be adjusted to reflect any changes in the deliverables. The contractor will submit any changes in deliverables in writing to the GRC.

**Ethical Conduct**

Apart from a contact required for any on-going business at OSU, vendors are specifically prohibited from contacting any individual at, or associated with the OSU regarding this RFP. Vendor communication shall be limited to the contact named on the cover page of this document. A vendor’s failure to adhere to this prohibition may, at OSU’s sole discretion, disqualify the vendor’s proposal.

**Cancellation for Lack of Funding**

A resultant agreement may be canceled without any further obligation on the part of The Ohio State University in the event that sufficient appropriated funding is unavailable to assure full performance of its terms. The vendor shall be notified in writing of such non-appropriation at the earliest opportunity.

**Quote**

Applicant responses must be valid for 120 days.

**Contract Term**

The contract term will commence on the date of award and continue through June 30, 2015. Pricing will remain firm for the initial period. At the end of the initial period, the
contract may be renewed for an additional 1-year period (at the same terms and conditions, and with a revised scope of work and pricing), upon the signed mutual agreement between OSU and the awarded vendor. OSU will review requests for price increases for each renewal period.

**Requirements for Advance Approval**

Prior to out-of-state travel of conference attendance by SUBGRANTEE and/or its MEDTAPP subcontractors, SUBGRANTEE will consult with ODM concerning the nature of, and cost of, each out-of-state travel plan and conference registration for an amount exceeding $1,000. The subgrantee must provide in detail how the travel is critical to the project purpose.

**Data Use and Management**

a. The Contractor will become familiar with and fully implement all requirements of HIPAA.

b. The Contractor will be in compliance with Federal, HIPAA and State confidentiality law, for data use, and management including but not limited to access, storage, and transmission, shall be role-based, specific to this agreement.

c. The Contractor shall enter separately into a Business Associate Agreement (BAA) with OSU-GRC to receive data funded/authorized under this agreement, in accordance with the Business Associate Agreement between ODM and OSU-GRC.

d. The Contractor shall enter separately into a Data Use Agreement (DUA) with OSU-GRC to receive data funded/authorized under this agreement, in accordance with the Data Use Agreement between ODM and OSU-GRC.

e. The contractor shall not use any information, systems, or records made available for any purpose other than to fulfill the obligations specified herein.

f. The contractor’s possession of information provided may be considered confidential or proprietary under the laws of the State of Ohio or under federal law, and that contractor agrees to promptly notify OSU and ODM of the receipt of any public records requests for information related to this Agreement in order to seek to have any confidential or proprietary information withheld from the document prior to its release.

g. All data provided to the contractor may only be used for the specific associated agreement and for no other use in projects not associated with the agreement, and that any contractor’s data release, sharing, or transfer beyond its initial approved scope and specifications will be considered as unauthorized.
Information Technology Policy

The contractor shall submit an Information Technology (IT) Policy to ensure all equipment or supplies purchased with MEDTAPP funds are being used in accordance with HIPAA privacy and security rules. This policy must include letters from the:

- Project principal investigator (PI) that outlines a detailed plan of how HIPAA compliance and/or data security is being implemented; and
- Institution’s designated personnel (e.g. HIPAA compliance officer, legal affairs representative, privacy/security officer, etc.) who has the authority to confirm and assume responsibility for certifying that the project’s proposed activities are in compliance.

Presentation, Publications and Dissemination

The contractor shall obtain OSU and ODM prior approval for release of any results including preliminary and/or final results related to funded projects or funded data under this Agreement.

ODM will provide the contractor review and feedback on peer reviewed academic journal articles within 30 days of submission of a draft to ODM. Notwithstanding the preceding, if the parties disagree concerning whether certain information should be detailed or modified, the parties agree to meet for the purposes of making good faith efforts to discuss and resolve any issues or disagreements.

Time Sensitivity – Any data or publication release may be delayed due to ODM policy/program change.

The contractor shall obtain OSU and ODM prior review and permission to release any products resulting from activities, funded data or projects under this Agreement.

Materials Review Policy and Timeline:

- Materials subject to review
  - Materials intended for external use and public distribution, including journal article submissions, media releases (including all media outlets), public presentations, and outlets intended for public distribution;

- Materials not subject to review
  - Materials intended for internal use and internal distribution to the following outlets, including to members involved in the project or as part of a student’s
credit/degree/course requirements: action period slides; learning session materials; and graduate theses, student term papers, and class presentations; and

- Materials submission
  - Materials must be submitted 3-4 weeks in advance to receive approval from ODM.

When issuing press releases, requests for proposals, bid solicitations, and other documents or statements describing projects or programs funded in whole or in part with Federal money, all grantees receiving Federal funds, including but not limited to State and local governments shall clearly state:

1. The percentage of total costs of the program or project which will be financed with Federal money;
2. The dollar amount of Federal funds for the program or project; and
3. The percentage and dollar amount of the total costs for the program or project that will be financed by nongovernment sources.

**Interviews, Demonstrations, and Presentations**

The proposal evaluation committee may require some applicants to interview with the committee, make a presentation about their proposal, and/or demonstrate their products or services. Such presentations, demonstrations, and interviews provide an applicant with an opportunity to clarify the proposal and ensure a mutual understanding of the proposal’s content. The presentations, demonstrations, and interviews will be scheduled at the convenience and discretion of the evaluation committee. The evaluation committee may record any presentations, demonstrations, and interviews.

**Retention Requirement**

Each funded applicant will be required to certify program participants’ commitment to serve Medicaid beneficiaries, either through evidence of previous service to Medicaid beneficiaries or formal commitment documentation from program participants. Funded applicants may be required to complete a time study for faculty, staff and MEDTAPP Scholars funded through the MEDTAPP HCA Initiative and provide required information necessary to calculate proportional FFP reimbursement. Upon selection, projects must complete a retention questionnaire detailing formal retention strategies. Projects must also provide the retention commitment documents (ex: letter of intent) received from the participating CHW learners.
Contract Award

OSU intends to award the contracts for the work no later than June 1, 2014 if OSU decides the work is in its best interests and has not changed the award date. OSU expects the Contractor to have its key and support staff available to “start work” within five business days after OSU issues a purchase order under the Contract.

**OSU reserves the right to modify, by scope-of-work reduction or elimination, any elements of the work covered by this RFP and its OSU amendments, for any reason.**

Contract

If this RFP results in a Contract award, the Contract will consist of this RFP, written amendments to this RFP, the Contractor’s Proposal, written authorized amendments to the Contractor’s Proposal, OSU Terms and conditions, and the agreement between OSU and the project’s prime funding sponsor (ODM). It will also include any materials incorporated by reference in the above documents and any purchase orders and change orders issued under the Contract. If there are conflicting provisions between the documents that make up the Contract, the order of precedence for the documents is as follows:

1. Prime Sponsor Agreement;
2. OSU Terms and Conditions;
3. This RFP, as amended by OSU;
4. The documents and materials incorporated by reference in the RFP or OSU amendments;
5. The Contractor’s Proposal, as amended by the Contractor; and
6. The documents and materials incorporated by reference in the Contractor’s Proposal.

Notwithstanding the order listed above, purchase orders, change orders, and amendments issued after the Contract is executed may expressly change the provisions of the Contract. If they do so expressly, then the most recent of them will take precedence over anything else that is part of the Contract.
10. Contacts and Additional Information

Contacts

Potential applicants may request additional information about the MEDTAPP HCA Initiative by contacting:

Kyrsten Chambers
Healthcare Policy and Strategy Specialist
Phone: (614) 366-0539
Project Team Email: MEDTAPPHCA@osumc.edu

Applicant Questions

Questions regarding the RFP process must be submitted in writing to MEDTAPPHCA@osumc.edu. Answers to all questions received will be posted online at (http://grc.osu.edu/faqs/). Applicants should check periodically for updates.

Questions received after April 29, 2014 at 5:00 PM EST will not receive responses.
Attachment A
Center for Medicare and Medicaid Services Federal Financial Participation
Guidelines for MEDTAPP

Section 1903(a)(7) of the Social Security Act dictates that any costs claimed by a state for Federal match as Medicaid administrative costs must be deemed “proper and efficient” for the administration of the Medicaid State plan. Under the Medicaid Technical Assistance and Policy Program (MEDTAPP), Federal Medicaid administrative funding is available for eligible activities conducted under the Medicaid-university collaboration between the Ohio Department of Medicaid and colleges and universities to the extent that those activities benefit the Medicaid program and participating entities can properly identify allowable costs.

To claim costs as Medicaid administrative expenditures at the standard 50% Federal Financial Participation rate, the following requirements must be met:

- Costs must be allocated in accordance with the relative benefits received by all programs, not just Medicaid.
- Costs must not duplicate costs that have been, or should have been, paid through another source.
- Costs must be discounted by the Medicaid eligibility rate to ensure only those activities provided to Medicaid beneficiaries are claimed.
- Cost must be supported by an allocation methodology that appears in the State’s approved public assistance Cost Allocation Plan.
- Cost must not include funding for a portion of general public health initiatives that are made available to all persons, such as public health education campaigns.
- Costs must not include the overhead costs of operating a provider facility.
- Costs must not duplicate activities that are already being offered or should be provided by other entities, or through other programs.
- Costs must be supported by adequate source documentation.
- Allowable administrative activities must also be related to Medicaid State plan or waiver services.
- Continuing education or advanced training for providers may not be claimed as Medicaid administration.

Specific to the MEDTAPP Healthcare Access Initiative, 50% FFP\(^{11}\) may be provided for the following HCA training and retention strategies and activities:

\(^{11}\) To cover project administration costs, under the terms of this RFP, applicants are required to provide 51% of the total approved project cost in nonfederal share and will be reimbursed 49% FFP for properly claimable activities.
• **Planning and Program Development**-performing activities associated with the development of strategies to assess and increase capacity of programs to train and retain a specific number of CHW learners that are and will continue to be dedicated to serving Medicaid beneficiaries. Under the RFP, activities may include identification, engagement, and partnership with training sites treating a high volume of Medicaid beneficiaries, building interdisciplinary curriculum, and/or evaluating the program needs relative to Medicaid geographic and professional needs.

• **Coordination and Training Activities**-participating in, conducting, and/or coordinating training for MEDTAPP CHW learners in evidence based care delivery models that improve access to and delivery of services for Medicaid beneficiaries. This includes MEDTAPP funded CHW learners’ placement and retention costs related to training (e.g. preceptors, supervisor/supervisee training, curriculum coordination activities). Activities may also include salary equalizers necessary to place MEDTAPP Scholars.

• **Data Analysis and Evaluation**-analyzing data and conducting evaluation to assess the HCA Initiative's impact on the Medicaid program. This includes monitoring, evaluation of the program effectiveness (e.g., placement and retention of CHW learners/MEDTAPP Scholars) and potential quality improvement for the program.

CMS has specifically advised Ohio Medicaid that **MEDTAPP FFP may only be claimed for the portion of MEDTAPP HCA Initiative activities focused specifically on Medicaid beneficiaries and training needs for those CHW learners designated to serve Medicaid beneficiaries.** Therefore, to receive proportional FFP funding under this initiative, applicants must provide concrete healthcare practitioner training and retention strategies specific to the Medicaid population.

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12 Each funded applicant will be required to certify program participants’ commitment to serving Medicaid beneficiaries, either through evidence of previous service to Medicaid beneficiaries or formal commitment from program participants. Funded applicants may be required to complete a time study for faculty, staff and MEDTAPP Scholars funded through the MEDTAPP HCA Initiative and provide required information necessary to calculate proportional FFP reimbursement.

13 Field Training, placement and retention must occur in sites seeing a large number of Medicaid patients (i.e. Medicaid patients are more than 30% of practice’s patient population; combination of Medicaid/Medicare more than 50% of practice’s patient population; FQHCs; CMCs; RHCs; Other Safety Net Provider designations). Selected applicants will be required to certify that placement and retention sites meet these requirements.
A proportional FFP budget award example is below:

<table>
<thead>
<tr>
<th>EXAMPLE OF MEDICAID PROPORTIONAL FFP SHARE REIMBURSEMENT TO MEDTAPP HCA INITIATIVE FUNDED PROJECT*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Project Cost = $1,500</td>
</tr>
<tr>
<td>Total Number of Learners Trained and Committed to Serve Medicaid beneficiaries = 1</td>
</tr>
<tr>
<td>Total Number of Learners Trained= 5</td>
</tr>
<tr>
<td>Medicaid Share Factor=Number of Medicaid Students/Residents/Scholars divided by Total = 1/5 = 20%</td>
</tr>
<tr>
<td>Gross Claimable Amount = Total Project Cost ($1,500) x Medicaid Share Rate (20%) =$300</td>
</tr>
<tr>
<td>Project Cost non-attributable to Medicaid (ineligible MEDTAPP HCA Initiative funding) = $1200</td>
</tr>
<tr>
<td>FFP Rate (50%) - project administration cost (1%) =49%</td>
</tr>
<tr>
<td>Net Project Reimbursement Request ($300x.49) = $147</td>
</tr>
<tr>
<td>University Nonfederal Match Required ($300x.51) $153 (University matching dollars must support activities directly linked to serving Medicaid beneficiaries as outlined in this Attachment)</td>
</tr>
</tbody>
</table>

*Under the MEDTAPP HCA Initiative, funded project activities may only include Planning and Program Development, Coordination and Training Activities, Data Analysis, and Evaluation.
Attachment B: Project Formulary Guidance and Proposed Budget

**MEDTAPP Healthcare Access Initiative Allowable Expenses**

MEDTAPP funds may be used for allowable expenses listed below to support the development of innovative, comprehensive healthcare access training and retention programs that include field-based practice experience and curriculum enhancements to prepare participants to meet the complex needs of the Medicaid population.

**Students/MEDTAPP Scholars**

- Funds to increase the number of learners at the end of formal training to serve the Ohio Medicaid population in the CHW **Medicaid Professional Needs Area** identified in this funding opportunity (Section 1).
- Funds may be designated to pay tuition, salaries, and benefits.
- Of highest priority under this funding opportunity are programs training CHW learners at the end of the training pipeline and prepared to enter the healthcare workforce on or before June 2015.
- Programs focusing on learners at earlier stages of training are also necessary, particularly those implementing innovative models to attract and retain learners to serve the Medicaid population.

**Faculty/Staff Engaged in Teaching, Precepting, Training Program Development, and Planning**

- Funds may be used to support faculty teaching, training, and precepting within the priority focus areas identified in this funding opportunity (Section 1), centered on expanding access to the Medicaid population in innovative care delivery settings. *(Note: MEDTAPP project funds may not be requested or utilized to provide clinical services also billed to Medicaid.)*
- Funds may be used to support faculty and staff engaged in curriculum redesign activities, such as developing new courses and programs of study focusing on best practice models for serving the Medicaid population in innovative care delivery settings.
- Funds may also be used to support planning activities, such as establishing new training sites and engaging partners.

**Miscellaneous Costs**

- Funds may be used to support travel (e.g. mileage and placement costs for learners in their final years of training), supplies, and other expenses that are necessary and reasonable for the program implementation. When miscellaneous costs are...
necessary and appropriate to the applicant’s proposal, they should be factored into stipend or compensation costs.

Other Guidance

- Applicants are required to submit a copy of their Federally Negotiated F&A Rate Agreement as part of the application.
- ODM limits applicants to no more than 10% administrative cost reimbursement (of total project costs). However, programs may use uncovered F&A costs as nonfederal match for this project.
- OSU reserves the right to apply appropriate university indirect rates based on the final scope of work.
- All selected applicants will be required to meet guidelines and follow procedures identified by Ohio Medicaid and OSU related to match certification and public expenditure certification.
- The burden is on selected applicants to meet the guidelines and procedures related to certification of all non-federal matching sources, including that bona fide donations are used for teaching and training purposes.
- In the budget documentation, applicants are requested to identify the source(s) of non-federal match contributions.
- If cost share is from a third party, the applicant must include a letter from the third party committing the funds.

Funding Formulary

- MEDTAPP funds will be allocated using an outcomes-based formulary intended to maximize the number of new participants practicing in the MEDTAPP CHW Medicaid Professional and Geographic Needs Areas within a short time-frame.
- Funding will be awarded based on the number of program graduates completing the customized training program developed through this funding opportunity and prepared to enter the workforce at the end of each fiscal year in the identified Medicaid Professional Needs and Medicaid Geographic areas.
- **This initiative's primary intent is to support training and field placement of CHW learners and MEDTAPP Scholars.** Funding may also support training program development, training of faculty, and other costs associated with training additional providers dedicated to serving Ohio’s Medicaid population using emerging healthcare delivery models. However, no more than 25% of total funds will be awarded for proposed activities outside of the funding opportunity’s primary intent.
- Maximum total annual MEDTAPP funding requests include: $15,000 per CHW learner unless otherwise approved. The applicant’s request must be justified based on needs of the program. Applicants that have secured similar funds from other
sources may use MEDTAPP funds to enhance and reorient other components of their training program, such as faculty and training program development.
Attachment C: MEDTAPP Healthcare Access Initiative Selection Criteria

Proposal Selection in Medicaid Professional Needs Areas:

In the Proposal Project Summary and Narrative sections, please clearly indicate that the CHW Medicaid Professional Needs Area is addressed.

Proposal Selection Criteria:

25% - The number of CHW learners and MEDTAPP Scholars committed to serving the Medicaid population that will be trained and placed to serve the Medicaid population in Medicaid’s Professional Needs Areas AND Medicaid Geographic Needs Areas (defined in Section 1, Section 6).

- Priority will be given to training programs with CHW learners nearing the end of their training AND prepared to serve Medicaid beneficiaries (e.g., funding to train residents is of higher priority than funds to train students).

20% - Program readiness and a comprehensive multidisciplinary approach to attract, train, and retain healthcare providers and improve access to and quality of healthcare services to Ohio’s Medicaid population.

20% - Use of innovative retention strategies, including incentives and methods to select, place, and retain CHW learners most committed to service the Medicaid population.

10% - Quality and effectiveness of training curriculum.

- Priority will be given to programs providing a broad range of coursework that includes multidisciplinary and emerging healthcare delivery models and evidence-based practices that have a strong Medicaid population focus.

- Realistic, feasible plan to build and/or further develop proposed program.

10% - Field experience in high volume Medicaid practice settings.

- Priority will be given to programs that utilize innovative, best practice treatment models (e.g., integrated, interdisciplinary treatment, health home model), provide highly qualified preceptors/field supervisors, and provide
placements of sufficient duration and intensity to prepare trainees to assume leadership roles in similar settings.

7.5% - Faculty credentials or success in a similar program.

7.5% - Appropriate budget.

Note: Other sections of the proposal not listed above will not be scored. However, they may be addressed in the reviewers’ recommendations and/or in the final selection of funded proposals. If all required sections are not included in the proposal, it will not be eligible for review.