



REACH Healthcare Foundation

Building Connections to Coverage and Care

REQUEST FOR PROPOSALS

Proposal Deadline: May 13, 2022

Award Range: up to \$45,000

Award Term: 1 year

Background

The [REACH Healthcare Foundation](#) has adopted a Community Investment Framework to guide our funding decisions from 2022 to 2026, with the goal of achieving equitable health outcomes for all people in our communities. The Framework includes three priority Outcome Investment areas: *Bridge the Coverage Divide*, *Close the Health Equity Gap*, and *Strengthen the Safety Net*.

We place a particular **emphasis on whole person care needs of Black, Latinx, immigrant, refugee, low-income and rural populations**, acknowledging that social determinants of health are key drivers of inequitable health outcomes. We recognize that no single or set of community investments can resolve longstanding inequities created by decades of institutionalized racism and policies that marginalize people. With our limited resources, the REACH Foundation seeks to produce sustainable improvements **by honoring the voices within impacted communities, collaborating to address their needs, and advocating for policy change.**

Funding Opportunity

This Request for Proposals (RFP) is part of our **Bridge the Coverage Divide** investment priority, and specifically our strategy to *connect health care consumers to culturally appropriate providers, health insurance, and other public benefits.*

In the past, the Foundation funded separate initiatives to support enrollment assistance and to connect consumers to health care. From the insights of our grantees, as well as a considerable body of research, we learned that people experiencing health disparities fare better when they receive health insurance enrollment support, connection to care, *and* support for accessing additional public assistance through one trusted, culturally competent organization. Efforts are more successful when the organization has a deep understanding of and connection to the community it serves, a strong analysis of systemic racism and other dimensions of inequity, and a program design that specifically responds to these drivers and the unique needs of its community.

We invite proposals from organizations currently providing the following services in an integrated way, or interested in expanding current client assistance to include all of these services:

1. **Coverage enrollment:** Enrollment outreach and assistance with Healthcare.gov, the Children’s Health Insurance Program (CHIP), KanCare in Kansas and MO HealthNet in Missouri.
2. **Public Assistance enrollment:** Enrollment outreach and assistance for persons and families living in poverty to enroll in publicly funded programs including, but not limited to Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), the Child Care Assistance Program (CCAP), Supplemental Security Income (SSI), and Women, Infants, and Children (WIC).
3. **Care connection:** Support to clients in locating and connecting to accessible, affordable, quality, health care services.

Grants will be awarded for *up to* \$45,000 for one year, beginning in July 2022.

Eligible Applicants

501c3 organizations, 501c3 fiscally sponsored organizations, quasi-governmental, and governmental agencies are eligible to apply.

We welcome proposals from organizations that have a track record of providing effective health coverage enrollment and/or care connection support tailored to the specific needs of a priority population(s). Organizations that have focused exclusively on health coverage and care are welcome to propose an expansion of their services to include more holistic efforts to connect clients to other forms of assistance as well.

We also welcome proposals from organizations that have histories of trust with and service to communities experiencing health disparities but that do not currently offer health insurance enrollment and care connection. These proposals will be considered if the organization has experience managing other forms of wrap-around client support—such as assistance securing other public benefits, housing, jobs, etc.—and is prepared to integrate health coverage enrollment and care connection into their services.

Priority Populations

Applicant organizations must demonstrate a significant proportion of their service utilizers reside within the foundation’s [6-county service area](#). Within this area, the foundation’s community investment framework places a priority on the needs of **Black, Latinx, immigrant, refugee, low-income and rural populations**, acknowledging that social determinants of health, systemic racism, language barriers, fear of deportation and discrimination, stigma, and long-term underinvestment in rural and low-income communities are key drivers of inequitable health outcomes.

Use of Funds

We believe that organizational leaders are in the best position to determine how funds should be allocated to support the work. The REACH Foundation does not limit the types of expenses this grant can support, so long as expenses remain within the IRS limits of legal expenditures for nonprofit organizations and are not used for lobbying. Proposals should include a budget that demonstrates how you intend to spend the resources as a way to help us understand your strategy and needs.

We also understand that many organizations are already providing holistic, culturally competent enrollment and care connection with an existing population(s) but need funds to sustain the current level of service or improve the quality and infrastructure that supports existing services. As a result, grant funds can be used to:

- Maintain the current level of services in organizations that are already providing the full suite of public assistance and health insurance coverage enrollment and care connection services in a culturally competent way to a priority population(s).
- Improve the quality of existing services and the infrastructure that supports it by expanding staff training, improving data systems for client management and follow-up, increasing benefits or salaries to maintain quality enrollment and navigation staff, etc.
- Add new services such as adding coverage enrollment assistance or care connection to other kinds of support already provided to clients, or adding assistance securing other public benefits to existing coverage and care connector work.
- Expand the population reached by accommodating more clients within your current geography and priority population, expanding to new geographies within the 6-county REACH service area, or broadening services to new populations (provided the approach is appropriately tailored).

We recognize that competitive proposal processes can sometimes incentivize organizations to promise expansion even before they have the infrastructure to expand successfully or sustainably. We also understand that organizations with the deepest, most trusted relationships within communities experiencing health disparities and systemic racism often are chronically underfunded and have not had the resources to establish core infrastructure and sufficient staffing. As a result, our selection process is designed to give full consideration to proposals aimed at maintaining or improving the quality and sustainability of existing programs as to those aimed at expansion. Our priority is that organizations have what it takes to provide quality, culturally competent services to priority populations over the long term.

Criteria for Selection

The REACH Foundation believes—and evidence confirms—programs that are a) culturally competent and b) designed to address the specific systemic barriers affecting different populations are more effective at reducing health disparities. We believe “one size fits all” solutions that fail to account for barriers such as systemic racism are destined to increase rather than decrease disparities. We also

believe organizations with a strong rooting in the community they serve, along with a purposeful process for ensuring they listen and are accountable to the voices of those most impacted, are more likely to design solutions that work. Successful applicants will have:

- 1) A strong understanding of the unique systemic and structural barriers to enrollment and care connection experienced by one or more of the REACH Foundation's priority populations (described above).
- 2) A program proposal that connects priority population(s) to health insurance coverage, to other public benefits, and to quality healthcare providers in a way that is tailored to the specific barriers experienced by the priority community, culturally appropriate, and grounded in a deep understanding of community assets, needs, and interests.
- 3) A history of successfully working with clients on EITHER health coverage enrollment and care connection OR enrolling in and navigating other social support systems related to the social determinants of health (e.g., housing, employment, etc.) that could be expanded to include health coverage and/or care connection.
- 4) Evidence of an organization-wide commitment to honoring voices within impacted communities, with purposeful strategies for staying accountable to community experience, interests, and needs.
- 5) Methods for tracking and following up with clients and capturing client outcomes OR a proposal to develop that capability through the grant.

Expectations & Commitments

Grant recipients will be expected to:

1. Have adequate capacity to track client outputs and outcomes, or otherwise include a plan for building that capacity within the grant proposal.
2. Submit a 6-month expense report (budget vs actuals) illustrating how REACH funds have been spent.
3. Participate in a mid-year conversation with the REACH Foundation program team (possibly an in-person site visit) to celebrate progress, strategize together about challenges, and share learning from both sides.
4. Submit a brief (~3-4 pages) final narrative grant report and an accounting of programmatic expenses against your proposed budget. This report will include data about successful enrollments and care connections.

In addition, awardees will receive a request for demographic information (race, ethnicity, gender) about the board and leadership staff after grants are awarded. REACH requests this information because we have made a commitment to supporting equity and addressing the historic imbalance of funding to organizations lead by and serving communities of color in particular. We will use data to help us

understand how the nonprofit sector in our service area is doing with respect to diversity, equity and inclusion in its governance and leadership, and support organizations to make improvements where needed. We will also use it to hold ourselves accountable for addressing hidden biases in our own funding patterns.

The REACH Foundation commits to a timely and transparent selection process, and will provide feedback to any applicant that requests an explanation of our funding decision. We also commit to quickly processing payments and providing reporting guidelines at the time grantees receive their initial grant agreement so that organizations know what information will be requested. Reporting requirements will be kept to a minimum, focusing on information we will actually use to improve our strategy and inform the REACH Board about progress. Finally, we commit to providing grantees with an opportunity for anonymous feedback to us on the quality of our process and communications, as well as the degree to which we are meeting our commitment to equity in our choices and processes. We will take this feedback into account to improve our processes, communications, and grantmaking decisions.

Key Dates

Request for Proposals and Application issued	Wednesday, April 13, 2022
Proposal Deadline	Friday, May 13, 2022
Grant Award Notifications	Friday, June 15, 2022
Grant Term Begins	Friday, July 1, 2022

Application

Click on this link <https://reach-portal.givingdata.com/campaign/ConnectionstoCoverageAndCare> for the *Building Connections to Coverage and Care* application.

The following documentation will be requested as part of your application.*

- a. Program proposal [up to 5 pages]
- b. Program budget that illustrates the planned use of REACH funds.
- c. List of Board of Directors including professional affiliations
- d. Most recent Audit
- e. IRS Form 990 (for 501(c)(3) organizations)
- f. Board-approved Non-Discrimination Policy

* We recognize that small, new, and emerging organizations may not yet have all the listed documents. **This does not preclude you from receiving a grant award.** We will support awardees who are missing key documents (i.e. an audit) to complete them by the end of the grant term.

Program budgets and budget explanations can be submitted in any format provided the budget illustrates how REACH funds specifically will be allocated. If you would prefer to use a simple budget template, one is available for download within the online application.

For More Information

If you have questions pertaining to the RFP or the application process, contact REACH Healthcare Foundation program staff at (913) 432-4196 or grants@reachhealth.org.