

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

Section 1: Overview & Purpose

To provide one-time funding to support projects that will expand access to housing (permanent housing and/or structured transitional housing) for Medi-Cal members enrolled with Partnership HealthPlan of California (the Plan, PHC). The project must reflect a collaborative process involving community support and, where possible, leverage existing local funds or other resources.

Through this grant program, PHC seeks to address the critical housing and housing-related needs that affect the health and overall costs of health care for our 572,000 members. The Plan has allocated a total of \$25 million to this program for the purpose of making a **one-time** grant to projects that will be selected based on proposals submitted in response to this RFP; attached is the breakdown of allocation for investments to meet the needs of PHC members in each county or region served by PHC.

Partnership HealthPlan of California (PHC):

Partnership HealthPlan of California (PHC) is a public non-profit organization that contracts with the State of California to serve Medi-Cal beneficiaries in 14 Northern California Counties: Del Norte, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Shasta, Siskiyou, Solano, Sonoma, Trinity and Yolo. The Plan is governed by a 35-member Board of Commissioners made up of appointees from each of the 14 county Boards of Supervisors, with two member representatives. PHC works closely with county, provider and community groups to address the needs of the Medi-Cal population. Further information about Partnership HealthPlan and its service structure can be found on our website, partnershiphp.org.

Eligible Applicants Summary of Key Requirements:

Successful applications will meet the following criteria:

- Applicant must have a record of serving Medi-Cal beneficiaries and experience in providing the services outlined in the grant proposal.
- The proposed project(s) must be the result of a collaborative process that includes key community stakeholders in the geographic area (the Area) served under the proposal. These processes should involve the Area's county health and human service agency/ies; at least two providers or community partners that have significant experience in serving the target population; and at least one agency associated with the area's housing or homeless service programs.

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

- Must be committed to contribute data and participate in the area's Homeless Management Information System (HMIS) and/or show capacity and commitment to engage in HMIS participation.
- Must provide a sound sustainability plan for the continuing effectiveness of the proposed project once the grant funds are expended.

Section 2: Projects Eligible for Funding

Two (2) broad categories of projects are eligible for funding:

Capital Projects:

Capital projects address the housing and housing-related needs of Medi-Cal members enrolled with PHC. Grant funds may be used to expand, construct, renovate and/or acquire dwellings adequately zoned for residential use for the implementation of permanent and/or program-based transitional housing dedicated to meeting the high priority needs of PHC members.

Examples of potential capital projects:

- Acquisition of property to provide housing for PHC members.
- Matching funds to leverage resources in the construction of permanent or transitional housing for PHC members.
- Purchase of "beds" dedicated for PHC members in existing facilities to provide permanent or transitional housing.
- Renovation of existing facilities – such as existing but inadequate structures or newly identified housing design to provide accessible, decent, safe, and affordable housing for PHC's high needs population.
- Capitalized Operating Subsidy Reserve (COSR) to make housing affordable to PHC members with extremely low incomes, including members with disabilities.

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

Housing Facilitation Projects:

Housing facilitation projects may provide for a range of housing-related services, including consultation, information systems, technical support and housing financial assistance.

Examples of potential housing facilitation projects:

- Rapid rehousing programs providing rental/utility deposit assistance or other payment(s) determined necessary to eliminate housing barriers while increasing housing stability and retention rates of PHC members.
- Participation in existing geography-wide systems to coordinate housing and housing support(s), including Homeless Management Information Systems or access lines.
- Development of dedicated housing support staff, to assist PHC members in identifying and navigating resource opportunities available within the community (e.g., HUD Continuum of Care or Public Housing Authority programs), while aiding in housing placement and retention support.
- Technical support and other costs for pre-development activities associated with a housing project that will expand access to housing for PHC members (including design, feasibility studies, testing, architectural plans and specifications, development of funding applications, zoning approvals, etc.)

Section 3: Grant Requirements

1. *Qualified applicants:* Applicants must show significant experience in serving Medi-Cal beneficiaries in the areas of service addressed in the grant application.
2. *Collaborative process:* The proposed project must be the result of a collaborative process that involves key community stakeholders in the geographic area (the Area) served under the proposal, including the Area's county health and human service agency/ies; at least two providers or community partners that have significant experience in serving the target population and at least one agency associated with the Area's housing or homeless service programs. Where relevant, the applicant must commit to participation in the available HMIS system or similar systems. Multi-county applications are allowed.
3. *Sustainability plan:* Applicant must provide a sound sustainability plan for the continuing effectiveness of the proposed project once the grant funds are expended.

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

4. *No supplantation or duplication:* The proposed funding cannot supplant existing funding or duplicate the opportunities provided through other funding programs available to the Area such as the pending "No Place Like Home" or other initiatives. However, the use of the grant funds to match any of these sources of funding for existing or pending projects is encouraged as a way to leverage funds.
5. *Effectiveness:* Applicant must show how the proposed project will effectively house the target population and specify the expected health outcomes associated with the project.
6. *Target Population:* Applicant must specify how PHC members affected by the funding will be identified.
7. *Evaluation component:* Applicant must outline a process for the evaluation of the effectiveness of the proposal, and provide key benchmarks for ongoing review of the success of the project. Applicant agrees to participate in PHC's analyses of efforts as requested.
8. *Commitment to sign Memorandum of Understanding:* Applicant must verify their intention to sign an agreement based upon the sample MOU attached.
9. *Willingness to share data:* Applicant must commit to the sharing of applicable data. If the applicant is affected by restrictions in the sharing of data please explain in the narrative portion of the application.

Section 4: Selection Process

Proposals will be reviewed by PHC staff and recommendations made to the PHC Board based on the established criteria.

Northern and Southern Region Review Committees: Proposals will be reviewed by two separate committees made up of key PHC staff and Board leadership; one representing Northern Region Counties, (Del Norte, Humboldt, Lassen, Modoc, Shasta, Siskiyou, Trinity), and one representing Southern Region Counties, (Lake, Marin, Mendocino, Napa, Solano, Sonoma, Yolo). The Southern Region committee will review all Northern Region applications and the Northern Region Committee will review all Southern Region applications. PHC staff will serve on both committees. The review committees may request additional information during the application review process. The review committees consisting of PHC staff and PHC Board Members will make funding recommendations to the PHC Executive Staff and CEO for their final review and recommendation.

Depending on the grant type, a site visit or meeting may be requested after review of the Proposal.

Decisions of the Executive Board and CEO are final and not subject to appeal.

PHC’s Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

Section 5: Timeline

Key dates for Local Innovation Housing Grant Initiative:

Deliverable	Date
Release of RFP	Wednesday, July 5
Deadline for Submission of Questions*	Friday, July 21
Application due date	Wednesday, August 23
Announcement of grantees	Friday, October 24

NOTE that applicants may seek an extension in the submission guidelines which may be granted by PHC at its discretion. If granted, the application will not be reviewed for the first round of funding.

***Questions:**

Questions are welcome and must be submitted via email to: Housing@partnershiphp.org. All Questions and Answers will be posted anonymously on the PHC website. The identity of those submitting the question will be omitted from the PHC website.

Section 6: Applicant and Submission information:

Application Submission:

Each application must include all contents outlined below. Failure to follow these specifications will result in disqualification.

Applications must not be more than 10 pages in length, and include:

- PHC Cover page
- Project Narrative
- Budget Narrative
- Budget Template

The application should include any additional supplemental documents including letters of support from partnering organizations. The application should be prepared as a single PDF document.

Applications are due by **Wednesday, August 23**. Applications received after 5 p.m. PST will not be considered.

Applications should be sent to PHC via email to: Housing@partnershiphp.org

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

Section 7. Criteria for Successful Applications

Required criteria:

1. The proposed project directly links to PHC's Community Benefits goals of High Quality Care, Healthy Communities, and/or Improving Access;
2. The proposed project does NOT promote political causes, candidates, organizations, or campaigns;
3. The organization must maintain financial records in accordance with generally accepted accounting principles and maintain an annual audit by an independent certified accountant each fiscal year;
4. The organization does not discriminate on the basis of race, color, religious creed, national origin, age, sex, marital status, sexual orientation, gender identity, handicap, disability, medical condition or veteran status, either in their employment or their service policies and practices;
5. The proposed project would directly impact PHC Medi-Cal beneficiaries, primarily;
6. The organization has a positive proven track record serving the identified population;
7. If the organization is a PHC contracted provider, the organization must be in good standing regarding their provider contract;
8. All organizations affiliated with this submission must be in good standing with the U.S. Department of Housing and Urban Development;
9. The intervention proposed is tied to the effectiveness of the health system, with provisions linking the target population to the social, health and community support necessary for their disease management and/or overall health;
10. The intervention proposed is likely to reduce overall health care costs over the life of the project;
 - a. There is a demonstrated return on investment (in prior published or unpublished studies) or a reasonable case to be made for a return on investment; or
 - b. Other respected organizations with a focus on reducing health care costs are pursuing this intervention.
11. The application is the result of a collaborative process, documented through co-applicants, letters of support, or other means.

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

Preferred criteria:

1. The intervention interfaces with PHC's health care delivery system.
2. The lead agency is a PHC contracted provider, or other high-performing community based organization, and has an infrastructure to support the proposed intervention. For instance,
 - a. An entity with experience in this area that can be subcontracted to provide the service; and/or
 - b. Other community partners willing to share in funding, leading or otherwise supporting the intervention.
3. PHC funding is critical for the project to move forward, (i.e. other potential funding resources have been sought and are not available, or PHC funding provides a match or gap funding required for a project to successfully obtain other resources.)
 - a. Preference will be given where there is proportionate matching funding secured from another organization.
4. Proposed intervention is an outcome of community needs assessment and data analysis.
5. Where applicable, applicant is in collaboration with the jurisdictional Continuum of Care (CoC) to address housing needs and gaps that have been prioritized based on local data and strategies to prevent and end homelessness.
6. Proposed intervention would help address prolonged and inappropriate hospital stays by coordinating with discharge planners and taking direct placements from hospitals, particularly in Shasta, Humboldt and Sonoma Counties.

Other factors to be considered:

1. Measurable, verifiable outcomes for the intervention are defined, obtainable without extraordinary effort, and reasonable.
2. Proposed intervention aligns with allowable project activity as defined by applicable state, county and/or city jurisdictional criteria.
3. Cultural competency/relevance of the proposed intervention.

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

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4. Organizational capacity of the lead organization as measured by:
 - i. Demonstrated successful delivery of similar initiatives.
 - ii. Willingness of the leadership and governance of an organization to prioritize this project.
 - iii. Organization in good standing with PHC (No corrective action plans, not on probation or under investigation).
 5. Achieving a mix of different types of projects in different geographic regions.
 6. Reasonableness of project cost projections.
 7. Reasonableness of any proposed overhead, administrative or indirect expenses.

Project Narrative:

Please respond clearly and succinctly to the following questions (maximum of 10 pages).

1. Briefly describe the proposed project that the requested funding would support.
2. Describe the targeted population this grant would fund and why the targeted population(s) has (have) been prioritized for assistance.
3. Describe which organizations are involved with the effort and describe their roles in funding and/or project implementation.
4. Describe the collaborative process used to identify and define the identified problem and proposed grant.
5. Describe why the proposal is likely to be effective in improving health outcomes of PHC members. Please provide references of the same or similar programs that have been implemented in the past, if available. Describe the impact of the intervention on overall health care costs, including references if available.
6. What do you expect will be different in five (5) years as a result of implementing the proposed project? For instance, what systems will be changed? What populations will benefit?
7. Describe your organization's capacity to collect quantitative data related to the proposed project. How will you measure success?
8. Provide measureable, attainable goals with a timeline for achieving the anticipated goals.

PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

9. Describe how the impact of the proposed project will be sustained into the future beyond the 24-month grant term.
10. Describe your organization's capacity to implement and manage the proposed project. Who will lead the effort? Describe the organization's track record for implementing similar projects. If your organization is collaborating with another organization(s), please identify the organization(s) and their role within the collaboration.
11. Describe the challenges anticipated with implementing the proposed project and strategies to mitigate these challenges.

Project Budget:

As part of the application, the applicant must submit a:

1. Full Scope Budget (a budget template is attached).
2. Budget Narrative (no more than two pages, single-spaced) on how it will use the funds. Include a description of resources your organization will use to match all, or a portion of the requested funds from PHC.
3. Additional funds leveraged.

Section 8 Award Information:

Total Funding:

PHC will award local Innovation Grants on Housing to organizations through a letter of Grant Announcement. Innovation awards will provide financial support and facilitation of technical support to successful proposals. Deliverables and deadlines will be defined and based upon a signed Memorandum of Understanding. Award amounts will vary based on the scope of the proposal. To the extent that a given county's or Area's total funds are not expended through the initial grant process, funds will be held in reserve for future applications from that county or Area, at a time to be determined by PHC.

Award Amount:

Grants awarded through this Initiative are one-time grants. It is at the discretion of PHC to select the award amount given.



PHC's Local Innovation Grants on Housing Request for Proposals (RFP) July 2017

Expected Period of Performance:

The expected period of performance will be outlined in the grant proposal and mutually agreed to by PHC and the grantee, with clearly defined milestones to ensure the project's progress.

Termination of Award:

Continued funding is dependent on satisfactory performance against goals and performance expectations delineated in the cooperative agreement's terms and conditions and, if applicable, approved operational plans. PHC reserves the right to terminate the cooperative agreement if it is determined to be in the best interests of PHC.

HOUSING GRANT ALLOCATIONS AVAILABLE BY COUNTY

	County	PHC Membership*			Housing Grant Dollars Available	
Northern Region	Del Norte	11,314			\$ 493,118	
	Humboldt	53,149			\$ 2,316,486	
	Lassen	7,416			\$ 323,225	
	Modoc	3,057			\$ 133,239	
	Shasta	60,282			\$ 2,627,376	
	Siskiyou	17,895			\$ 779,949	
	Trinity	4,483			\$ 195,390	
	<i>Region Subtotal</i>	<i>157,596</i>			<i>\$ 6,868,784</i>	
Southern Region	Lake	30,536			\$ 1,330,904	
	Marin	39,396			\$ 1,717,065	
	Mendocino	37,770			\$ 1,646,196	
	Napa	28,928			\$ 1,260,820	
	Solano	112,745			\$ 4,913,964	
	Sonoma	112,827			\$ 4,917,538	
	Yolo	53,797			\$ 2,344,729	
	<i>Region Subtotal</i>	<i>415,999</i>			<i>\$ 18,131,216</i>	
Grand Total All Counties		573,595			\$ 25,000,000	



4665 Business Center Drive
Fairfield, California 94534

Grant Cover Sheet

For Local Innovation Grants on Housing

(Please type or print clearly)

Date:

Organization Information

Name of Requesting Organization (or individual):		
Primary Contact:		Title:
Address:		
City	State	Zip
Telephone	Fax	Email

Proposed Project

Type of Grant
<input type="checkbox"/> Capital Project
<input type="checkbox"/> Housing Facilitation Project
Brief Summary of Proposed Project



4665 Business Center Drive
Fairfield, California 94534

Counties/ Region Impacted
Estimation of PHC members impacted
Organization approval of attached proposed letter of agreement ___ Yes ___ No

Proposed Budget and Timetable

Project Budget	Project Timetable
Project Director	Organization



Budget for Innovation Grants on Housing

Organization/Contractor: _____

Project Title: _____

Project Period: _____

Project Director Name/Title: _____

Phone: _____

Email: _____

A. Project Staff Salary and Benefits

Name	Title	Salary	Benefits	FTE%	Total
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
<i>Total Salary and Benefits</i>					\$ -

B. Other Direct Costs

Item	Description/Justification	Total
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
<i>If including Equipment</i>		
Equipment Type	Purpose	Total
		\$ -
		\$ -
		\$ -
<i>Total Other Direct Costs</i>		\$ -

C. Subcontract(s)

Organization	Contact Person	Activity	Total
			\$ -
			\$ -
			\$ -
			\$ -
<i>Total Subcontract(s)</i>			\$ -

TOTAL BUDGET REQUEST \$ -

Project Director _____

Date _____

<<LOCAL INNOVATION GRANT ON HOUSING>>
MEMORANDUM OF UNDERSTANDING
BETWEEN
<<ENTITY>> through its <<ENTITY DIVISION>>
AND
PARTNERSHIP HEALTHPLAN OF CALIFORNIA

This Memorandum of Understanding (the “MOU”) is made and entered into by Partnership HealthPlan of California (“PHC”) and <<ENTITY>>, through its <<ENTITY DIVISION>> (“Health Care Site”, “Grantee”), also hereunder known as (“Party”, “Parties”). This MOU is effective <<EFFECTIVE DATE>>, and will expire on <<EXPIRATION DATE>>.

RECITALS/BACKGROUND

Partnership Healthplan of California is a non-profit community-based healthcare organization that contracts with the State of California to provide Medi-Cal services in several counties in Northern California, under a County Organized Health System model.

WHEREAS, PHC’s mission is to provide its Members (“Member”, “Members”) with access to quality health care services delivered in a cost effective and compassionate manner, and

WHEREAS, PHC has determined by resolving the critical housing-related needs faced by a percentage of its Members, may significantly improve the overall health of these identified Members, thus decreasing the health costs.

WHEREAS, PHC In addition, by partnering and collaborating with

FOR THIS REASON, PHC has developed a Local Innovation Grant on Housing Program for the purpose of partnering and collaborating with local community support, and where possible leveraging existing local funds and other resources to resolve the critical housing-related challenges of its Members, and be it

RESOLVED, that PHC has agreed to provide fiscal support by means of a grant to <<ENTITY>> through its <<ENTITY DIVISION>> (“Grantee”) for <<Environmental/Capital Improvements Projects to support the Grantee in expansion, construction, renovation, and/or acquire dwellings adequately zoned for residential use for the implementation of permanent and/or program-based transitional housing for PHC Members>>, and/or <<Housing Facilitation Projects to support a wide-range of housing-related services, including consultation, information systems, technical support, and housing financial assistance.>>and be it

FURTHER RESOLVED that in consideration of the promises and the mutual covenants herein stated, it is agreed by and between the Parties as follows:

HEALTH CARE SITE’S OBLIGATIONS

<<Environmental/Capital Improvements

- <<Deliverables and timelines of deliverables to be determined>>

<<Housing Facilitation Projects

- <<Deliverables and timelines of deliverables to be determined>>

FUNDING/PAYMENT SCHEDULE

Grant payments will be issued in the amount of \$ _____ for the term of this MOU, to be <<one-time payment or installments to be determined>>

TERM AND TERMINATION

The effective date of this MOU is <<EFFECTIVE DATE>> and will remain in force up to <<EXPIRATION DATE>>. Termination of this MOU will be based on funding currently approved. Future potential funding is outside the scope of this MOU.

This MOU, and its attachments, constitutes the entire agreement between the Parties and except as otherwise specified in this MOU may be amended only by both Parties agreeing to an amendment in writing, which must be executed by a duly authorized person of each Party.

Good Standing. PHC provides a variety of support initiatives, including support for <<list grant description>> to <<list type of grantee>> in good standing. <<list type of grantee>> in good standing are those currently contracted with PHC for the delivery of services, not currently in contract negotiations, not pursuing any litigation or arbitration against PHC at the time of program application or at the time of program application or at the time additional funds may be payable, and has demonstrated the intent, in PHC'S sole determination, to continue to work together on addressing community and member issues. Additionally, at the direction of the Chief Executive Officer or designee, PHC may determine that a provider is not in good standing based on relevant quality; payment or other business concerns. <<language around refunds due to PHC, if necessary>>.

OTHER PROVISIONS

Non-Discrimination. During the performance of this Agreement, Health Care Site and its subcontractors shall not unlawfully discriminate or harass against any employee or applicant for employment because of sex, race, color, ancestry, religious creed, national origin, physical disability (including HIV and AIDS), mental disability, medical condition (cancer), age (over 40) marital status, and use of family care leave and any other characteristics covered under state and federal law. Health Center and subcontractors shall ensure that the evaluation and treatment of their employees and applicants for employment are free of such discrimination and harassment.

Compliance with Law. Health Care Site agrees to comply with all State and local licensing standards, all applicable accrediting standards, and any other standards or criteria established by the State, or locally, to assure quality of service. Health Care Site agrees to comply with all applicable State and Federal laws and regulations during the term of this MOU.

Audit. PHC reserves the right to audit data submissions prior to payment. Upon request, Health Care Site agrees to provide copies of the supporting documentation based on the obligations of this MOU.

Counterparts. This MOU may be executed by electronic signatures or in one or more counterparts, each of which shall be deemed an original, but all of which, together, shall constitute one agreement.

IN WITNESS WHEREOF, the Parties have, by their duly authorized representatives, executed this Agreement, to be effective the date first written above:

<<ENTITY>>

Date

Date

Date

PARTNERSHIP HEALTHPLAN OF CALIFORNIA

Date

Date

M

Date

SAMPLE

<<SCOPE OF WORK/ DELIVERABLES TIME TABLE/ SUBMISSION FORMS>>

SAMPLE