Section 1: Overview

Purpose:
Partnership HealthPlan of California’s (PHC’s) mission is “To help our members and the communities we serve be healthy.” As a health plan, we engage in activities that improve access to care, quality of care, and coordination of care. While the highest quality care is a necessary stewardship of community health, it is not sufficient. Social determinants play a critical role in determining the health of our 551,000 Medi-Cal members as well as the health of their larger communities.

Social determinants of health (SDH), as defined by the World Health Organization, are “the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.”¹ Examples of social determinants of health include: employment, housing, food security, literacy, access to transportation, and education level. According to Healthy People 2020, the social determinants of health can be subdivided into five key areas:

- **Economic Stability** - Poverty, Employment, Food Security, Housing Stability
- **Education** - High School Graduation, Enrollment in Higher Education, Language and Literacy, Early Childhood Education and Development
- **Social and Community Context**, Social Cohesion, Civic Participation, Perceptions of Discrimination and Equity, Incarceration/Institutionalization
- **Health and Health Care** - Access to Health Care, Access to Primary Care, Health Literacy
- **Neighborhood and Built Environment** - Access to Healthy Foods, Quality of Housing, Crime and Violence, Environmental Conditions²

Role of PHC:
A health plan cannot make major impacts on the social determinants of health by itself. Coalitions of engaged organizations and individuals are key to achieving collective impact. In this context, we have defined six potential roles in helping the communities we serve be healthy (in approximate order of increasing involvement).

1. Participant
2. Convener/Catalyst
3. Partner
4. Advocate
5. Funder
6. Leader

Our optimum role (or roles) in promoting improvements in a social determinant of health will vary over time, depending on the nature of the program, community priorities, and the relative engagement and involvement of other community stakeholders.

For the purposes of these grants, we will serve the role of funder, targeting SDH programs at the health care system level.

*We will be funding two type of opportunities under the SDH Initiative: Implementation and Planning Grants. The SDH Implementation grants are for organization who are moving forward with an established program, see Attachment A.*

*If an organization is interested in improving SDH, but does not have a feasible grant proposal under the requirements for the Implementation grants, we are offering a few smaller planning grants to help develop local community coalitions targeting social determinants of health; see Attachment B.*

**Selection Process:**
Our staff will work with each region’s PHC Commissioners and key partners to review proposals and make recommendations to PHC leadership regarding funding. The recommendations will be based upon the criteria outlined in this RFP. PHC leadership will select the grantees. The decision of the PHC leadership will be final.

**Timeline:**

<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Release of RFP</td>
<td>Friday, November 6, 2015</td>
</tr>
<tr>
<td>SDH Workshop</td>
<td>Monday, November 9, 2015</td>
</tr>
<tr>
<td>Application due date</td>
<td>Friday, December 18, 2015</td>
</tr>
<tr>
<td>Announcement of grantees</td>
<td>Friday, January 29th, 2016</td>
</tr>
<tr>
<td>Grant period</td>
<td>March 1, 2016- February 28, 2018</td>
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**Authority:**
At the June 2015 PHC Board of Director’s Meeting, the Board approved supporting SDH under the “Local Innovation Grants.” This will provide a total of $1.5 million, allocated among our four regions and awarded through a competitive process to local organizations.

**Background:**
Partnership HealthPlan of California (PHC) administers managed Medi-Cal and some other services for the eligible residents of 14 Northern California counties. We are a health insurance organization, and is legally a subdivision of the State of California, but is not part of any city, county or state government system. We began serving Medi-Cal eligible persons in Solano in May 1994. That was followed by Napa in March of 1998, Yolo in March of 2001, Sonoma in October 2009, Marin and Mendocino in July 2011, and eight Northern Counties (Del Norte,
Humboldt, Lake, Lassen, Modoc, Shasta, Siskiyou, and Trinity) in September 2013. We are governed by a Commission of 35 members representing the PHC 14-county delivery area.

Section 2: Selection of Grantees

Grant Priorities:
The Local Innovation Grant Initiative program, of which this grant is a part, has been established to support local initiatives that improve the health of our members.

Suggested areas to focus the grant may include, but not limited to:

- Fostering cultural change within the health care system
- Increasing health literacy
- “Warm” (i.e., face to face) referrals of clients to necessary social or behavioral health services
- Tobacco Cessation programs
- Improving data collection related to social determinants of health

Section 3: Award Information:
Please see Attachments A and B for specific award information for each type of grant.

Section 4: Applicant and Submission information:

SDH Best Practices Sharing Workshop:
November 9, 2015
10 a.m.-3 p.m.

Locations:
- 4665 Business Center Drive
  Fairfield, CA 94534
- 495 Tesconi Circle
  Santa Rosa, CA 94501
- McConnell Foundation
  800 Shasta View Dr.
  Redding, CA 96003
- Sequoia Conference Center
  901 Myrtle Avenue
  Eureka, CA 95501
Application Submission:
Each Application must include all contents required in this document and conform to the following specifications. Failure to follow these specifications will result in disqualification.
- Use 8.5” x 11” letter-size pages (one side only) with 1” margins (top, bottom, and sides).
- Font size must be no smaller than 12-point.
- All pages of the Project and Budget Narrative must be numbered in the lower right hand corner with the name of the submitting entity in the left lower corner.

Applications must not be more than 20 pages in length, and include:
- PHC Cover page;
- Project Narrative (no more than 8 pages, single spaced);
- Budget Narrative (no more than 2 pages); and
- 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.

All Applications are due by Friday, December 18, 2015. Applications received after 5 p.m. will not be considered.

Applications should be e-mailed to PHC Local Innovation Grants at InnovationGrants@partnershiphp.org.

Application Review:
Application submissions will be reviewed in their totality. We will select projects according to the selection criteria presented here. The final decision is at the sole discretion of PHC leadership.

Additional Materials Regarding Partnership HealthPlan of California
- PHC’s Strategic Plan http://www.partnershiphp.org/about/StrategicPlan.pdf

Additional Questions
For additional questions, please contact the Innovation Grant program at InnovationGrants@partnershiphp.org.
Attachment 1
Request for Proposals for SDH Implementation Grants

Purpose:
The SDH Implementation grants are intended to help local organizations improve the health of our members. We seek to support projects that are either likely to be sustained after the grant ends and/or project that result in a systemic change and/or have a long-lasting impact.

Criteria for Successful Applications
Required criteria:
1. The intervention directly impacts PHC members.
2. The intervention is tied to the effectiveness of the health system, including but not limited to access to health care, health literacy programs, initiatives integrating social services and health care, and population health management programs targeted at high risk individuals.
3. The intervention is likely to reduce overall health care costs in the short or medium term (less than 3 years).
   a. There is a proven 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.
4. The requested two-year funding from PHC must not exceed $500,000.
5. For the purposes of the activity outlined in the proposal, the applicant is part of a coalition addressing social determinants of health in general, or the proposed project in particular. The selected intervention should be an outcome of the coalition action plan.
6. Community support is reflected by including with the application at least two letters of support from individuals or entities representing local government or parts of the community organizations.

Preferred criteria:
7. The intervention interfaces with PHC’s health care delivery system.
8. The lead agency is a PHC contracted provider 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.
9. PHC funding is critical, for the project to move forward (i.e. other potential funding resources have been sought and are not available)
   a. Preference will be given where there is proportionate matching funding secured from another organization.
10. Proposed intervention is an outcome of community needs assessment and data analysis.
Other factors to be considered:

11. Measurable, verifiable outcomes for the intervention are defined, obtainable without extraordinary effort, and reasonable.
12. Cultural competency/relevance of the proposed intervention
13. Organizational capacity of the lead organization as measured by:
   a. Demonstrated successful delivery of similar initiatives
   b. Willingness of the leadership and governance of an organization to prioritize this project
   c. Organization in good standing with PHC (No corrective action plans, not on probation or under investigation)
14. Relative burden of social determinants of health issues in targeted geographic area (greater preference for areas with greater burden of social factors contributing to poor health outcomes.)
15. Achieving a mix of different types of projects in different geographic regions

Project Narrative:
Please respond clearly and succinctly to the following questions (maximum of eight pages).

1. Describe the targeted SDH program this grant would fund and which organizations are involved with the effort.

2. Describe the assessment process used to identify and define the identified problem. Please provide references of the same or similar programs that have been implemented in the past, if available. Please describe the impact of the intervention on overall health care costs, including references if available.

3. What innovative solution(s)/strategies will address the identified problem?

4. What do you expect will be different in a year as a result of implementing the proposed project? In two years? For instance, what systems will be changed? What populations will benefit?

5. Describe your organization’s capacity to collect quantitative data related to the proposed project. How will you measure success?

6. Provide measurable, attainable goals with a timeline for achieving the anticipated goals.

7. Describe how the impact of the proposed project will be sustained into the future beyond the 24-month grant term.

8. 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.

9. 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 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.

A budget template is attached.

**Award Information:**

**Total Funding:**
PHC will award Innovation Grants to organizations through a letter of Grant Announcement. Innovation awards will provide financial support, and facilitation of technical support, to successful proposals. Award amounts will vary based on the scope of the proposal.

**Award Amount:**
Grants awarded through this Initiative are one-time, two-year grants. Grants may be requested for an amount totaling no more than $500,000; although it is expected that most grants will be for smaller amounts. It is at the discretion of PHC to select the award amount given.

**Period of Performance:**
March 1, 2016 - February 28, 2018

**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.
Attachment 2
Request for Proposals for SDH Planning Grants

Purpose:
We want to empower communities to develop a community collaborative to focus initiatives on Social Determinants of Health (SDH) that impact their region. Research shows the social, political, and economic environments a person lives in has a large impact on health outcomes.

Project Narrative:
Please respond clearly and succinctly to the following questions (maximum of six pages):

1. What community would be served in the creation of this local coalition?
2. What organization would be the lead in development and facilitation this coalition?
3. Identify community partners interested in participating in this coalition.
4. Identify other potential funding resources to sustain the coalition after this initial funding for planning.
5. Describe how this coalition would develop a community assessment and identify data analysis needed to identify which areas of social disparity this group should focus.

Project Budget:
As part of the application, the applicant must submit a 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.

A budget template is attached.

Deliverables:
At the end of the grant funded period, each grantee will submit a strategic planning document on how the coalition will be sustainable in future years. More information will be shared with selected grantees.

Award Information:

Total Funding:
PHC will award Innovation Grants to organizations through a letter of Grant Announcement. Innovation awards will provide financial support, and facilitation of technical support, to successful proposals. Award amounts will vary based on the scope of the proposal.
**Award Amount:**
Grants awarded through this Initiative are one-time, one year grants. Grants may be requested for an amount totaling no more than $50,000. It is at the discretion of PHC to select the award amount given.

**Period of Performance:**
March 1, 2016 - February 28, 2017

**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.