



VIRGINIA
HEALTH CARE
FOUNDATION

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15 YEARS
500,000 LIVES

Project Connect Special Request for Proposals

Proposal Due Date: January 23, 2008

OPPORTUNITY

Significant progress has been made in enrolling children in Virginia's children's health insurance (FAMIS) programs over the last ten years. Successful outreach and media events have raised awareness, and policy changes have simplified the enrollment and renewal process. In many communities, there are significantly fewer children who need first time enrollment assistance or assistance with the renewal process, and many local organizations have assumed responsibilities for outreach and enrollment assistance.

Despite these successes, there remains work to be done in targeted areas of Virginia to provide enrollment assistance and to institutionalize outreach and enrollment activities to ensure that all eligible children have the benefits of the FAMIS programs. Current estimates indicate more than 96,000 children in Virginia are eligible, but not enrolled in FAMIS and FAMIS Plus.

With funding from the Anthem Blue Cross Blue Shield Foundation, the Virginia Health Care Foundation (VHCF) is issuing this Special Request for new *Project Connect* Proposals to establish local initiatives to identify and enroll eligible children in the FAMIS programs with the goal maximizing the number of children who enroll in FAMIS and FAMIS Plus. The initial grants will cover an 18-month period, and funds can be used for salary, benefits and related project costs. This activity is at the heart of VHCF's mission of increasing access to primary health care for Virginia's uninsured and medically underserved.

This document details the process for applying to the Virginia Health Care Foundation for *Project Connect* funding. **A mandatory pre-proposal workshop will be held on Thursday, December 13, 2007 from 10:00 a.m. – 1:00 p.m. at the Virginia Hospital and Healthcare Association (4200 Innslake Drive, Glen Allen, VA 23060). Any organization wishing to apply is required to send a representative, and can register for the pre-proposal workshop by calling Jen Johnson at (804) 828-5804. A request for funding must be submitted by 5:00 pm on January 23, 2008.**

Who Can Apply?

To be considered for a *Project Connect* grant an applicant must:

- A. Attend the mandatory pre-proposal workshop.
- B. Be tax-exempt under section 501(c)3 of the Internal Revenue Code; or be a public agency.
- C. Demonstrate a clear and detailed plan for identifying and enrolling eligible children and submitting applications on their behalf (*please note that preferences will be given to organizations with a "front line" connection which engage in "hands on" enrollment activities*);

- D. Show evidence of collaboration with the social services departments within the area the applicant intends to target;
- E. Have a plan to publicize the applicant's enrollment initiative via various forms of media;
- F. Commit that at least 25% of the project cost will come in cash and/or in-kind contributions from sources other than VHCF; and
- G. Have a plan to continue and sustain enrollment efforts until enrollment goals are met.

REMAINING PROCESS AND TIMETABLE:

Experience has shown that enrolling children in the FAMIS programs will not be as easy as merely informing families about the programs and making applications available. A participating grantee must be prepared to take a "hands-on" approach to making sure families submit all necessary application attachments and are approved for coverage without any unnecessary delays. The process developed for this *Project Connect* initiative is designed to assist applicants in evaluating their readiness to participate, and in developing a successful proposal.

Accordingly, there are two remaining stages to the application process:

1. **A *mandatory* Pre-proposal Workshop in Richmond on Thursday, December 13, 2007 where the particulars of the initiative and guidance regarding proposal content and specifics will be provided.**
2. **Submission of a full proposal.**

TIMETABLE

Pre-proposal Workshop in Richmond	December 13, 2007
Formal proposals with letters of support are due	January 23, 2008
Notification of awards will be sent by	February 29, 2008
Grant period	April 1, 2008 - September 30, 2009

APPLYING FOR *Project Connect* FUNDS

To apply for funding, please provide the following information:

- A. Complete the attached Executive Summary.
- B. Submit a Proposal for Funding (*not to exceed ten pages*) which:
 1. Clearly identifies the geographic area and the specific population targeted for this initiative;
 2. Describes the applicant's project in detail, with specific emphasis on how eligible children will be identified and assisted with applying for FAMIS and FAMIS Plus;
 3. Specifies the program's enrollment goals and describes with specificity how the disposition of each application will be tracked;

4. Shows evidence of collaboration with the social services departments within the area the applicant intends to target (*e.g. letters of support*);
 5. Identifies all other local collaborators and specifies their project-related roles, contributions, and responsibilities;
 6. Sets forth any marketing activities and techniques to be used;
 7. Describes the applicant's plan to continue the effort if enrollment goals are not met within the eighteen-month grant period;
 8. Demonstrates the project's cost-effectiveness;
 9. Establishes the qualifications of project leadership and personnel;
 10. Provides evidence of the applicant's success administering previous grants, especially those related to outreach;
 11. Commits to partnership with Department of Medical Assistance Services (*DMAS*), Department of Social Services (*DSS*), and VHCF, including working together to solve problems at the state and local level, participating in quarterly grantee meetings, providing data and meeting requests for information, and in other vehicles for sharing barriers, potential solutions, and best practices, and
 12. Is no longer than ten typewritten, double-spaced pages. Please use the standard font size (*12 point*) and 1" margins. The Executive Summary, letters of support, and budget are not included in the ten-page limit.
- C. Provide a **proposed budget** for the 18-month grant cycle. (*Use attached budget form.*) Include local public/private cash and in-kind contributions equivalent to a minimum 25% match of total project costs. The applicant must have matching donations in hand or a written commitment from a donor with specific details about a donation and the date it is available. The budget should represent only the revenue and expenses associated with the *Project Connect* grant. If the project is part of a larger initiative, please provide the latest annual budget for the initiative and list other funding sources as attachments.
- D. Include support letters from community partners evidencing the monetary/in-kind resource commitment identified in the proposal and budget. Letters of Support from key collaborators should be included as well. *Please note:* letters of support are required from the directors of the local social service departments with which you will be working.
- E. Names and affiliations of the project management team and evidence of prior successful grant awards and leadership within the community.
- F. Resume and signed letter of intent from the individual(s) who will serve as fiscal agent and supervisor of the proposed project.
- G. Evidence of the applicant's tax-exempt status.

DEADLINE

Please submit one original and five copies of the continuation request to the Virginia Health Care Foundation by January 23, 2008 at 5:00 p.m. Faxes and electronic copies ARE NOT acceptable. The Foundation will not acknowledge receipt of applications. Grantees are responsible for verifying the receipt of an application in the Foundation's office by the deadline. The Foundation will not review applications that are received after the deadline.

DECISIONS

The Foundation's Board of Trustees will make final decisions regarding applications. Determinations will be made based on the information provided in this application, as well as information obtained through the Foundation's other evaluation mechanisms, including interviews, background research and any previous experiences with applicant organizations. Each proposal will be evaluated with the following criteria in mind:

- The extent to which a project has outlined a feasible child health insurance outreach and enrollment plan;
- The effectiveness of the applicant's approach;
- The applicant's capacity to perform successfully;
- The extent of community commitment and support for the project;
- Clear commitment to work with DMAS, DSS, VHCF and others to identify barriers, potential solutions, and best practices; and
- Specific and reasonable budgets.

SPECIAL INSTRUCTIONS, POLICIES AND INFORMATION

- Please examine your proposal carefully to ensure you have provided all the information requested by the Foundation and that your proposal meets all the specifications outlined in the guidelines. The Foundation will not review incomplete proposals or those which do not follow the specifications listed within the RFP.
- All attachments and additional materials should be submitted with the formal proposal. The Foundation will not accept any materials, including Letters of Support, received under separate cover.
- Foundation funds may not be used to pay indirect costs, administrative assessments or fees of universities or other institutions with which a VHCF project is affiliated.

CONDITIONS OF GRANT ACCEPTANCE

Each grantee must sign a letter of agreement with the Virginia Health Care Foundation which delineates the terms and specific objectives of the project and requires the grantee to submit requested data and reports on a timely basis and to assist with any evaluation process as requested.

Project Connect Targeted Localities

Campbell County
Chesterfield County
Henrico County
Henry County

Lynchburg City
Montgomery County
Pittsylvania County
Radford City

Roanoke City
Spotsylvania County
Stafford County

EXECUTIVE SUMMARY
Virginia Health Care Foundation
Project Connect

Applicant Organization:

Contact *(Include title and phone #):*

List of localities to be served *(including most recent estimates of uninsured eligible children):*

Number of children to be enrolled in FAMIS programs:

List the type and names of other organizations in your community that will be targeted to assist families with enrollment assistance *(e.g. names of medical practices, school systems, community service agencies)* **and describe specific techniques that the project will utilize to institutionalize outreach in identified organizations** *(e.g. policy and procedure changes, incorporating message into written materials).*

Brief description of the project *(include what work will be continued, if applicable, and what will be expanded):*

Total VHCF funds requested:

Total project cost:

VHCF contribution towards total project costs (%):

List specifically what VHCF funds will be used for:

Project Budget: Income

SOURCE OF INCOME	CASH	IN-KIND	TOTAL
I. VHCF GRANT			
II. LOCAL PRIVATE SOURCES			
III. LOCAL GOVERNMENT FUNDING			
IV. STATE GOVERNMENT FUNDING			
V. FEDERAL GOVERNMENT FUNDING			
VI. FOUNDATION GRANTS			
VII. OTHER			
TOTAL INCOME			