

# Care Coordination Agency RFA

## Submitted Questions

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### August 17th, 2023

These questions have been submitted the week of Aug 14<sup>th</sup>:

- ▶ What if we have interest in doing this work but now is not the right time?
  - Please email [Kelly@omahafoundation.org](mailto:Kelly@omahafoundation.org) expressing your interest in this work, why you are not applying currently, and that you would like to be considered for future opportunities.
- ▶ If our current focus is not serving Black residents should we not apply?
  - Here are factors to consider in determining whether to apply for this opportunity:
    - ▶ Geographically our priority is residents living east of 72<sup>nd</sup> St. in Douglas and Sarpy county - given the rates of poverty and barriers to resources experienced by these residents.
    - ▶ We do have a priority to serve Black pregnant people given they experience the highest rates of poor birth outcomes. As you will see, the evaluation rubric does take into account experience serving this population or interest in serving this population.
    - ▶ However, we do not intend for this to be an exclusive focus. We do want to be intentional in our outreach and engagement with the Black pregnant community and serve those needs. We also want to start this work and learn and grow with the right agencies to make sure we can do this work well and grow it.
    - ▶ We cannot anticipate at this point the number, type and strength of applications so do not know what the salient distinguishing factors will be in selecting the agencies - which is why we have both the questions that we chose in the application as well as a strong selection committee to help us make decisions on the best way to launch this work.
    - ▶ We are actively fundraising to bring on a 3<sup>rd</sup> CCA as soon as possible (hopefully within the next 6 months) that will help expand our work and take into consideration whether we want to add specialized skills and focus areas (such as language, ethnicity, culture, etc.).
    - ▶ With that in mind, I do not know yet if we will select the 3<sup>rd</sup> agency from current applicants or if we will open the application again. It will depend on the applicants. Regardless, we will hold current applications for when the opportunity arises.
    - ▶ If an agency has interest in this work, capacity to do it (and capacity to apply), and feels they can support the priority (but not exclusion) of serving Black residents, we encourage them to apply.
    - ▶ If this priority would stretch the organization in a direction that does not fit with the organization's mission and goals, I would encourage them to either apply and state the

interest in future work OR send a letter to [kelly@omahafoundation.org](mailto:kelly@omahafoundation.org) expressing the interest in future opportunities so we have that on file.

- ▶ What if we apply and are not selected, what are the opportunities to work with the HUB now or in the future?
  - Current applications will be kept on file for consideration as we expand our work. As noted in the earlier question, we are actively fundraising to bring on a 3<sup>rd</sup> CCA and will do so as soon as possible.
  - Regardless, most agencies have the opportunity to be a partner with HUB as 1) a referral agency (referring participants to the HUB or the HUB referring to the agency for services), 2) strategic partner in addressing maternal and child health, and / or 3) strategic partner in addressing social determinants of health in our community.
  - We plan to reach out to all applicants as decisions are made to discuss both the outcomes of the CCA application as well as to discuss future work together.

### August 3<sup>rd</sup>, 2023

These questions were discussed during the CCA RFA Kick-Off Webinar.

- ▶ How long is the period for the budget estimate?
  - Please estimate an annual cost to employ a CHW including salary (range is ok), benefits, supervision costs, and other operational costs (mileage, phone, etc.)
- ▶ Does a CHW need to be 1.0 FTE?
  - We modeled our outcomes based on an assumption of a 1.0 FTE. In the model to be certified CHWs must be working at a minimum of 0.5 FTE implementing the PCHI® model. The HUB and the CCAs can work together to determine the best model for each agency which may be full- or part-time. Our goal is to get to the equivalent of 4 FTEs total across the two agencies, which may be a higher number of CHWs if in a part-time model.
- ▶ What is the award time period?
  - We estimate starting to contract with CCAs in October 2023, with the goal of serving participants by the end of 2023 (but as soon as possible). Our current demonstration project is estimated to go through 2024 but this timeline can be adjusted with the CCAs depending on hiring and training timelines, enrollment, ramp up time, funding, etc. We are actively raising funds to extend our seed funding to initiate this work and provide a runway for impact while we establish the outcomes-based contracting.
- ▶ How will CCAs be paid in this award?
  - We will finalize the payment structure with the selected CCAs as part of the final decision making and contracting process. The model will be a combination of at least 50% of the funding through reimbursement to the CCA for the outcomes achieved and the other 50% being based in up-front payment for engagement / met deliverables. The total payment to the CCAs initially in this work will be capped at the total agreed upon costs. We do not want CCAs to feel at risk of joining this work and so we will make sure in this initial stage that while we focus on outcomes, the CCAs cost are covered for meeting key deliverables.



- In the future, when sustainable outcomes-based contracts are in place, CCAs will be paid through a combination of engagement fees and outcomes-based payments. See example in the CCA RFA Kick-Off Webinar slides.
- ▶ How will participants be identified and engaged?
  - There will be many ways participants may be engaged. With our current funding there are no specific directives other than the focus on pregnant individuals living east of 72<sup>nd</sup> St. with an emphasis on serving Black pregnant individuals.
  - We will work with the CCAs and our Community Advisory Council to set eligibility criteria and may further prioritize certain groups of eligible individuals to ensure we are delivering the right services to the folks that can benefit the most.
  - Participants may be identified directly through existing clientele of the CCAs, they may be engaged through outreach by the CHW, and/or they may be referred by healthcare providers, insurance companies, or other community-based organizations. We anticipate the CHWs playing an extremely important role in identifying and engaging participants in the early stages of this work.
- ▶ Are CHWs expected to be trained before the grant award?
  - Training needs will be determined once we know current levels of training for the CHWs that are either dedicated to this work or who are hired. All CHWs will need PCHI® Model Training” which is how to implement this model. Some CHWs, depending on prior training may meet the required core competencies or may need additional training. The HUB will work with the CCA, CHW, and PCHI® to assess if / what additional training is needed and the best way to provide that training. If a CHW has some foundational training and experience, they can start serving participants once PCHI® Model training is complete and we will work on any gap training within the first 6 months of this project. If a CHW does not have foundational training we will likely have them complete the PCHI® CHW training program (which includes PCHI® model training) before starting to work with participants.
  - All training costs will be covered by the HUB and do not need to be part of the CCA budget.
- ▶ How are HUBs set up in Omaha and Nebraska? Are there or will there be more than one HUB?
  - HUBs by design, and to meet PCHI® certification, must have a defined geography and be local to ensure they are embedded in the community and addressing local needs (i.e., serving folks approximately within a 50 mile radius). This HUB currently serves Douglas and Sarpy Counties and there will not be additional HUBs built in this region, although our services will expand to additional populations that can benefit from this model.
  - It is possible, and there is interest in building HUBs in other areas of the State.
- ▶ Who can be served by the CHW? Is it just the pregnant person or others as well?
  - The PCHI® model is a whole-family approach. As a CHW is working with an enrolled pregnant person if there are others members of the household including children or adults that could benefit from support addressing social, medical, and behavioral needs, the CHW can also enroll those additional household members.
- ▶ What is the goal for the timing of when pregnant people are enrolled?
  - Our goal is to enroll people as early in pregnancy as possible. Many times HUBs in the early phases experience a challenge with this and are connecting with participants later in pregnancy



and not realizing the desired impact on birth outcomes. While we still want to support these families especially in the important post-partum period, we also want to continue to improve our outreach and approach to engage pregnant individuals as early as possible. We will do this through developing partners and networks of support and by being as embedded in the community as possible.

