

# **Request For Applications**

## **In-person, Onsite or Combination Diabetes Prevention Programs in North Carolina**

Issue Date: December 6, 2018

Deadline to Submit: January 11, 2019 by 5:00pm EST



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## **Background**

In North Carolina, approximately one in three adults has prediabetes, and half of all adults aged 65 and older have prediabetes. Based on fasting glucose or A1c level, 34% of US adults had prediabetes in 2015. If this national prevalence is applied to North Carolina's adults, almost 2.7 million North Carolinians may have prediabetes.

A focus on prevention could decrease costs associated with diabetes for those living in North Carolina. Specifically, the US Diabetes Prevention Program research trial found participants who engaged in a lifestyle management program and maintained a 5-7% loss of body weight through eating smart and moving more were 58% less likely to develop type 2 diabetes.

Several different organizations in North Carolina offer diabetes prevention programs (DPPs) that are recognized by the Centers for Disease Control and Prevention (CDC). However, the uptake for these programs is low due to inability to pay for the program out-of-pocket and/or potential participants not being aware of the availability of the program in their area.

Blue Cross and Blue Shield of North Carolina (BCBSNC) is providing funding to NC State University (NCSU) to offer DPPs statewide at no cost and to collect and evaluate participant outcomes.

## **Goal**

By providing North Carolinians access to a no-cost DPP, the future healthcare burden attributable to diabetes and its complications can potentially be reduced. Evaluation of participant outcomes and program recommendations will provide data about the value of DPPs.

## **Purpose**

The purpose of this Request For Applications (RFA) is to provide funding to public and nonprofit providers of CDC recognized, in-person, onsite or combination DPPs across North Carolina from March 2019 to July 2022, for classes starting through July 2021. The providers will offer the program to eligible participants at no cost regardless of their insurance coverage. In addition, the funding can be used to cover participant incentives to keep them engaged in the program as well as support for transportation and childcare as needed to increase participation for in-person, onsite or combination DPPs. Providers selected for funding will receive technical assistance and support from NCSU throughout the funding period.

## **Funding Amount**

The total funding available for this RFA is \$1,500,000 over the funding period for DPP classes that can be launched from March 2019 through July 2021, contingent upon the availability of funds. Funds will be distributed on a reimbursement after participant enrollment and expenditure basis. Funds will be provided per participant enrolled at each selected DPP at a rate of \$230 for Phase 1 and \$200 for Phase 2. In order to receive funding for enrollment in Phase 1, participants must have attended at least one class (not including attendance at session zero, if offered). To receive funding for enrollment in Phase 2, participants must have attended at least 9 classes in Phase 1 and attended one class in Phase 2.

Organizations may request reimbursement for participant incentives. See a detailed explanation and schedule of allowed incentives and corresponding reimbursement guidelines in Appendix B. Organizations may also request reimbursement for the following two social supports: childcare and

transportation support such as gas or bus cards. Organizations may not apply solely for participant incentives or social supports.

If your organization is already receiving funding for DPP from another source, participants covered by that funding source cannot be included in this funding request or vice versa.

## **Applicant Eligibility Criteria**

In order to be eligible to apply, organizations must be CDC recognized providers of a DPP and able to offer in-person, onsite or combination classes within the state of North Carolina. If, after reading the full RFA, you are not sure if you are eligible, please contact our team prior to applying.

### **Required**

1. Current CDC-recognized DPP within North Carolina with an active DPRP number. CDC recognition status may be pending, preliminary, or full at the time of application and some level of recognition must be maintained for the duration of the funding period. Funding will be contingent on retention of CDC recognition status.
2. In-person, onsite or combination delivery of DPP that adheres to the [2018 DPRP Guidelines. \(https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf\)](https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf)
3. Classes must be held at locations within North Carolina.
4. Agreement to use standard program evaluation surveys with participants at the end of Phase 1 and Phase 2 and share de-identified participant data with NCSU on an ongoing basis for reporting.
5. Agreement to participate in standardized evaluation activities to gain insight from program instructors and program coordinators.

### **Preferred**

1. Applicants with a DPP program in multiple locations or multiple counties in North Carolina.
2. Applicants that conduct multiple classes per year.
3. Applicants serving areas of the state that are currently underserved and have unmet demand for DPPs.

### **Exclusions**

1. Applicants are not allowed to subcontract with other organizations for this RFA.
2. For-profit companies and individual lifestyle coaches without a DPRP number are excluded to apply for this RFA.

## **Applicant Scope of Work**

Selected applicants shall:

1. Maintain CDC recognition for their DPP throughout the entire funding period.
2. Ensure that all program instructors are trained lifestyle coaches per CDC requirements.
3. Market the program to target audiences in their local area using the standardized, funder-approved marketing templates and/or materials provided by NCSU.
4. Screen and recruit eligible participants for DPP.
5. Ensure each class has a minimum of 10 participants and a maximum of 20 participants enrolled at the start of Phase 1 (excluding session zero, if offered).
6. Implement a structured in-person, onsite or combination yearlong DPP using a CDC-approved curriculum.

7. Collect participant data at enrollment and throughout the program and share specified participant data with NCSU. Reporting will be closely aligned with CDC required reporting. Data elements to be reported for each enrolled participant may include but are not limited to the following metrics:
  - a. Marketing channel i.e. *How did the participant hear about the program*
  - b. CDC eligibility criteria used to enroll participant
  - c. A1c, *if collected*
  - d. Height
  - e. Weight
  - f. Minutes of physical activity
  - g. Session attendance
  - h. Transportation and childcare support provided per class
8. Use a standard evaluation form to collect data from enrolled participants at the end of Phase 1 and Phase 2. Completed evaluation forms must be submitted to NCSU within two weeks following the end of Phase 1 and Phase 2.
9. Invoice NCSU on a pre-determined schedule, based upon enrollment numbers for each class offered during the time period covered by each invoice, and based on actual provision of incentives and social supports. A draft invoicing schedule for each yearlong DPP that is offered is listed below:
  - a. Invoice for Phase 1 enrollments submitted within 3 weeks of Phase 1 starting.
  - b. Invoice for Phase 2 enrollments submitted after the first class of Phase 2. This invoice will also include expenses incurred for incentives and social supports (transportation and childcare) provided during Phase 1.
  - c. Final invoice for expenses incurred for incentives and social supports (transportation and childcare) provided during Phase 2.
10. Participate in monthly check-in conversations with NCSU team to discuss progress and any support needed.

## **Planned Schedule of RFA Activities**

1. The RFA will be posted at [www.DiabetesFreeNC.com](http://www.DiabetesFreeNC.com) on December 6, 2018.
2. FAQ will be posted on [www.DiabetesFreeNC.com](http://www.DiabetesFreeNC.com) for all interested applicants. Written questions can be sent to [ccgoudre@ncsu.edu](mailto:ccgoudre@ncsu.edu) through January 4, 2019. Answers to submitted questions will be posted on the website. We will respond ONLY to technical submission issues after that date.
3. Application submission deadline: **January 11, 2019 by 5:00pm EST**
4. Notification of decision: February 11, 2019
5. An informational call will be held for selected providers during the week of February 18, 2019.

## **Application Review Process**

Applications will be reviewed by a committee for completeness, content, budget, and expected ability to provide a CDC-recognized DPP in an in-person, onsite or combination delivery format for eligible North Carolinians. As this is an RFA, NCSU reserves the unqualified right to reject any and all applications when such rejections are deemed to be in the best interest of providing comprehensive DPPs throughout the state of North Carolina.

Each application section area shall be scored based on the criteria below:

- Background which demonstrates experience offering CDC recognized DPPs in NC
- Capacity to sustain and/or grow current diabetes prevention programs
- Data collection and reporting plan
- Funding impact

Each of the above criteria shall be scored on a scale of 1 to 4 based on a scale like the one below:

- 1: POOR. Applicant only marginally addressed the content area.
- 2: AVERAGE. Applicant adequately addressed the content area.
- 3: GOOD. Applicant did a thorough job of addressing the content area.
- 4: EXCELLENT. Applicant provided a superior response to the content area.

Applicants that are fully recognized by the CDC and/or that are located in underserved areas of the state may receive additional consideration and are encouraged to apply.

## How to Respond and Submit an Application

1. The application must be typed on 8.5" x 11" paper with margins of 1". Line spacing should be double-spaced, with 12-pt font. **The maximum length for the application is 12 total pages, which must be submitted as a single attachment, except the budget**, which must be a separate attachment and must be submitted as an Excel document.
2. Applicants will submit a complete application packet with both the application and the separate budget file together. Electronic submission of the application packet by email to [ccgoudre@ncsu.edu](mailto:ccgoudre@ncsu.edu) is required. No faxed applications will be accepted. All signatures on documents must be scanned original signatures or verifiable digital signatures such as DocuSign. Stamped or typed signatures will not be accepted.
3. Application documents should be arranged in the following order. Attachments must be included as one document in the main application.

- a. Application Face Sheet

A blank application face sheet is included as Appendix A of this RFA.

- b. Application

This application is to highlight the applicant's current capacity and future plans to offer in-person, onsite or combination DPPs in North Carolina and highlight how the funding would increase capacity and reach. Please include the following sections in your application:

- **DPP Program Structure** – describe organization's current DPP structure and staff capacity to conduct a yearlong DPP. Please include details of the DPP curriculum used in this section. Describe your specific program features, as well as class format and average class size. Please include applicable participant engagement and program outcome data from previous classes in this section. Include details about your instructors and their experience.
- **DPP Program History** – describe the length of time that DPP programs have been offered, including the date you received your CDC recognition and anticipated renewal timeline. Please include information on location of previous and anticipated classes, and if your program operates in an underserved area.
- **DPP Enrollment** – describe how the program will be marketed, how participants will be screened for DPP eligibility, and how they will be enrolled in the program. Describe how your organization identifies or targets potential eligible participants. How does your organization reach out to potential program participants? What eligibility screening tools are used by your organization? Please include enrollment totals for the past two years of your program (or entire history if program is newer than two years).

- **Data Collection and Security** – describe your current data collection procedures and how data is stored and reported. Please include any data security protocols that would apply to data that is stored or submitted electronically.
- **Funding Impact** – describe how the RFA funding would impact your current program, number of participants, reach of program, and ability to recruit new participants. Please include information about other sources of funding that your program currently receives, and if/when that funding will end.
- **Timeline** – provide a detailed implementation timeline for the applicant scope of work.

c. Budget

Applicants must submit a detailed budget in .xlsx formats using the budget template provided which requires each item to be included in the budget for the funding period March 2019 – July 2022, which will include classes launched through the end of July 2021. The budget template is posted on [DiabetesFreeNC.com](http://DiabetesFreeNC.com). A narrative justification must be included for each line item listed in the budget and should be directly related to participant recruitment or engagement in DPP. The justification should explain how each line item was calculated and how the expense supports the project. The template may be modified to remove line items and categories if needed, except the ‘Participant Enrollment’ category, which is required. Totals should be in whole numbers. The budget must be submitted as an Excel document. While incentive costs are included in the projected budget, please submit your full incentives schedule in your main application (see Appendix B for details).

Allowable line items in the budget are:

- Expected participant enrollment by each phase; \$230 per participant for Phase 1 and \$200 per participant for Phase 2. Please ensure the narrative includes justification for expected enrollment totals. This projection cannot include participant enrollments that may already be covered through another funding source.
  - In order to receive funding for enrollment in Phase 1, participants must have attended at least one class (not including attendance at session zero, if offered). To receive funding for enrollment in Phase 2, participants must have attended at least 9 classes in Phase 1 and attended one class in Phase 2.
- Transportation and childcare support for participants.
- Incentives to improve participant engagement in the program. Incentives will be based on a semi-standardized incentive schedule (see Appendix B) that includes flexibility for individual providers, but ensures a similar value is offered across selected programs.

Budget should be based upon target numbers for enrollment for each year of the funding. Each class must be structured with a minimum beginning enrollment of 10 participants and a maximum of 20 participants. Incentive items should be tied to participant engagement.

Unallowed line items include:

- Indirect cost
- Pre-award costs

d. IRS Letter Documenting Organization’s Tax Identification Number (public agencies) or IRS Determination Letter Regarding Your Organization’s 501(c)(3) Tax-exempt Status (private non-profits) and Verification of 501(c)(3) Status Form (private non-profits).

4. Applicants should submit complete applications, including budget spreadsheet in .xlsx format, in a single email submission by the submission deadline. The application review committee will not request follow-up information or clarification for any missing or incomplete documentation in the application after the due date.

## **General Information about Application Submission**

### **Award or Rejection**

All qualified applications will be evaluated and awards will be made using an established rubric which includes all eligibility criteria, budgeting, and ability to provide a quality DPP. NCSU reserves the unqualified right to reject any or all offers if determined to be in its best interest.

### **Frequently Asked Questions**

NCSU will post answers to general questions from applicants on [DiabetesFreeNC.com](http://DiabetesFreeNC.com) periodically as questions are received. Applicants are encouraged to check this frequently in case questions from one applicant are helpful to others as well. If your question is not included in the FAQs, or if you need technical assistance with submitting the application, please contact us at [ccgoudre@ncsu.edu](mailto:ccgoudre@ncsu.edu).

### **Exceptions**

All applications are subject to the terms and conditions outlined herein. All responses will be controlled by such terms and conditions. The attachment of other terms and conditions by any agency or organization may be grounds for rejection of that agency or organization's application. Funded agencies and organizations specifically agree to the conditions set forth in Award or Rejection section above.

### **Cost of Application Preparation**

Any cost incurred by an agency or organization in preparing or submitting an application is the agency's or organization's sole responsibility; NCSU will not reimburse any agency or organization for any pre-award costs incurred.

### **Elaborate Applications**

Elaborate applications in the form of brochures or other presentations beyond that necessary to present a complete and effective application are not desired.

### **Reference to Other Data**

Only information that is received in response to this RFA will be evaluated; reference to information previously submitted will not suffice.

### **Titles**

Titles and headings in this RFA and any subsequent RFA are for convenience only and shall have no binding force or effect.

### **Form of Application**

Each application must be submitted in the format requested by NCSU and will be incorporated into NCSU's Performance Agreement (contract).

### **Competitive Offer**

Pursuant to the provision of G.S. 143-54, and under penalty of perjury, the signer of any application submitted in response to this RFA thereby certifies that this application has not been arrived at collusively or otherwise in violation of either Federal or North Carolina antitrust laws.



**Agency and Organization's Representative**

Each agency or organization shall submit as part of the application's Face Sheet the name, address, and telephone number of the person(s) with authority to bind the agency or organization and answer questions or provide clarification concerning the application.

**Proprietary Information**

Trade secrets or similar proprietary data which the agency or organization does not wish disclosed to other than personnel involved in the evaluation will be kept confidential to the extent permitted by NCAC T01: 05B.1501 and G.S. 132-1.3 if identified as follows: Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL." Any section of the application that is to remain confidential shall also be so marked in boldface on the title page of that section.

**Participation Encouraged**

Pursuant to Article 3 and 3C, Chapter 143 of the North Carolina General Statutes and Executive Order No. 77, the funding agency invites and encourages participation in this RFA by businesses owned by minorities, women and the disabled, including utilization as subcontractor(s) to perform functions under this RFA.

**Subcontract**

NCSU will issue a subcontract and a Business Associate Agreement to each recipient of the RFA funding. Expenditures can begin immediately upon receipt of a completely signed subcontract.

## Application Face Sheet

1. Legal Name of Agency:	
2. Name of individual with Signature Authority:	
3. Phone number of individual with Signature Authority:	
4. Mailing Address (include zip code+4):	
5. Address to which checks will be mailed:	
6. Street Address:	
7. DPP Program Coordinator: Name:  Title:	Telephone Number:  Email Address
8. DPP Data Manager Name:  Title:	Telephone Number:  Email Address:
9. Agency Status (check all that apply):  <input type="checkbox"/> Public <input type="checkbox"/> Private Non-Profit <input type="checkbox"/> Local Health Department <input type="checkbox"/> Other	
10. Agency Federal Tax ID Number:	11. Agency DUNS Number:
12. Agency's URL (website):	
13. Agency's Financial Reporting Year:	
14. Agency's DPRP Number:	
15. Current Diabetes Prevention Program Areas (county(ies) and communities):	
16. Proposed Area(s) To Be Served with Funding (county(ies) and communities):	
17. Amount of Funding Requested:	
<p>The facts affirmed in this application are truthful and I understand that the truthfulness of the facts affirmed herein and the continuing compliance with these requirements are conditions precedent to the award of a contract. The governing body of the applicant has duly authorized this document and I am authorized to represent the applicant.</p>	
18. Signature of Authorized Representative:	19. Date

## Appendix B: Participant Incentives:

Organizations may request funds for participant incentives, **up to a total of \$100 per participant**, for the entire one-year program duration. Reimbursements will be provided at the end of each phase based on actual expenditures for incentives provided to each eligible participant.

Organizations may design their own incentive plans and choose what items to use. Organizations may also design their own schedule except the three required intervals listed below. These are based on participant engagement and are meant to ensure a degree of consistency for participants across funded programs.

### Minimum Required Participant Incentive Schedule:

#	Incentive Interval	Item Description	Value
1	<i>Attending 9 classes in Phase I</i>	<i>Example: "T-shirt, socks, gym bag, etc."</i>	\$
2	<i>Attending 3 classes in Phase II</i>		\$
3	<i>Attending 5 classes in Phase II</i>		\$

The above incentive schedule indicates the three (3) required time intervals for participant incentives. We encourage, but do not require, you to tie incentive interval #3 to attending the final session in Phase 2 to ensure you are able to get final end-of-program evaluations from participants. This schedule can be supplemented with additional incentive doses. If you supplement the minimum required incentive schedule, please include an attachment with the additional time intervals (i.e., number of classes) and a brief description of the type and value of the additional incentives. Ensure that your budget template reflects only items you plan to be reimbursed for, up to \$100 per participant per year.

To be reimbursed for expenses for participant incentives, receipts will be required. These must show amount spent to verify cost incurred to your organization. Please note, we cannot reimburse for any items purchased prior to the funding period, though we welcome the use of incentives that your organization currently uses in your program and what you may already have on hand.