

**North Carolina Health and Wellness Trust Fund Commission**

**Medication Assistance Program (MAP) – Phase II**

**Request for Proposals**

**CONTENTS:**

**PURPOSE**

**BACKGROUND**

**THE PROGRAM**

**GRANT TERMS**

**APPLICATION PROCESS**

**Note: This RFP outlines the purpose and background of this initiative and also provides useful resources to which applicants can refer. In order to apply for a grant under this RFP, you are encouraged to complete an online letter of intent and full application available at the Commission’s website ([www.HWTFC.org](http://www.HWTFC.org)). However, if you do not have Internet access, you may contact the Commission office to obtain copies of these forms.**

**REVIEW CRITERIA FOR APPLICATIONS**

**TECHINICAL SUPPORT AND TRAINING FOR APPLICANTS AND GRANT RECIPIENTS**

**DUE DATES AND PROGRAM TIMETABLE**

**Health and Wellness Trust Fund Commission**

**Mailing Address: 7090 Mail Service Center  
Raleigh, NC 27699**

**Street Address: 501 N. Blount St.  
Raleigh, NC 27604**

**Phone: (919) 733-4011 Fax: (919) 733-1240**

**E-mail [HWTFC@ncmail.net](mailto:HWTFC@ncmail.net)**

**[www.hwtfc.org](http://www.hwtfc.org)**

# North Carolina Health and Wellness Trust Fund Commission

## Medication Assistance Program (MAP) – Phase II

### Request for Proposals

#### PURPOSE

The N.C. Health and Wellness Trust Fund Commission (“Commission”) seeks to identify and fund projects in NC that will:

1. Educate North Carolina seniors about appropriate use of their medications.
2. Implement disease state management programs for North Carolina seniors
3. Help North Carolina seniors and other low-income citizens evaluate and apply for free, discount and low-cost drugs through public and private prescription assistance programs.

The Commission requires the Medication Assistance Program (MAP) to address these stated goals through grants to qualified recipients.

#### BACKGROUND

Elderly citizens in North Carolina who are uninsured or who qualify for Medicare coverage often find that they cannot afford the medications required to treat or ameliorate their chronic health problems. North Carolina’s General Assembly has created the Health and Wellness Trust Fund Commission dedicated to helping all North Carolinians achieve better health. Recognizing that access to prescription drugs is not a complete solution to the problem that North Carolina seniors are facing, the Commission seeks to fund a network of medication and disease management programs for seniors. In addition, these programs will also assist seniors and other low-income citizens in evaluating and applying for their optimal public and/or private drug coverage options.

In 2002-2003 the Commission awarded Medication Assistance Program grants to 26 organizations statewide. In 2004 the Commission expects to award additional grants of three types:

**Full Medication Assistance Program (MAP) Grants** – These will be awarded to organizations that have clearly demonstrated capabilities for delivering Medication Management and Prescription Assistance Services. The Commission expects to award 8 to 10 new **Full MAP Grants**. Existing MAP grantees can also apply under this category for geographic expansion to an uncovered county or to provide services in a county covered by their current grant where the need exceeds currently allocated resources.

**Limited Medication Assistance Program (MAP) Grants** – These will be awarded to organizations that have limited experience or are not ready to deliver full services. The Commission expects to award 25 to 30 **Limited MAP Grants**

## **THE PROGRAM**

### ***Who May Apply***

Under the NC General Statutes, an organization is eligible to receive a grant from the Commission if it fits into any of the following categories:

- A state agency,
- A local government or other political subdivision of the state or a combination of such entities (includes local education agency and/or public charter schools), and
- A nonprofit organization, which has as a significant purpose promoting the public's health, limiting youth access to tobacco products, or reducing the health consequences of tobacco use.

Other interested entities may partner with an eligible organization, which is functioning as the lead applicant for the grant. This lead applicant bears responsibility for fiscal and overall management.

### ***Objectives and Strategies of the MAP Initiative***

The Commission seeks to fund Medication Assistance Programs (“programs”) statewide. To be considered for a **Full MAP Grant** an applicant must demonstrate their potential in the following minimum program requirements:

- (1) Assist seniors and other low-income citizens with identifying their optimal prescription drug coverage options from amongst public and private programs, and then provide direct assistance in obtaining medication include dispensing the medications on site
- (2) Conduct “brown bag” evaluations for seniors with multiple medications for adverse drug interactions (All funded programs are required to complete a standard “Patient Evaluation Form” to be provided by the Commission for each completed evaluation);
- (3) Collaborate closely with local senior support services, pharmacists, primary care physicians, health departments, hospitals and other local and regional pharmacy resources to ensure the success of their efforts.

Full MAP applicants who do not meet the Full MAP requirements will be automatically considered for a **Limited MAP Grant** based on their potential to deliver any of these services, therefore Full MAP applicants should not simultaneously apply for a Limited MAP grant. Each grantee is expected to use computer technology to support their local programs and report operational, clinical, and financial results. The Office of Research, Demonstrations and Rural Health Development, NCDHHS will provide free software programs (the MARP software system) and training to any grantee who requests it for this purpose. This will be directly arranged by separate MARP User Contract with ORDRHD. Grantees may use other software or systems of their own choosing but will be required to meet the operational, clinical, and financial reporting requirements in the format provided.

All grantees are expected to assist eligible individuals, irrespective of age, in applying for free, low-cost and discount medications through prescription assistance programs, and drug company cards. In order to best serve their community these programs must be in easily accessible central locations. Preference will be given to applicants who have close working relationships with local pharmacists who may serve as a referral source as well as local physicians who may lack the time and resources to complete free drug program applications for their patients but would be willing to refer them to these centers, and may be willing to serve as volunteers to sign completed applications. Finally, it will require that these programs identify staff that can be trained to carry out this prescription acquisition function with seniors and low-income members of the community who use these programs.

In making grants, the Commission will consider diversity of populations served, geographic representation, and increasing capacity to respond to local health needs. The Commission will also consider likelihood of success for each applicant. Expansion of these services to areas where they are not presently available through Commission funded grants in Phase I (please visit the Commission website [www.hwtfc.org](http://www.hwtfc.org) for a list of current grantees) remains a high priority for the Commission.

## **GRANT TERMS**

Two and a half million dollars has been earmarked *on an annual basis for each of the next two years* for this effort. The Commission will award grants to new local programs or enhancement grants to existing local programs. **Full MAP grant** awards will be in an amount of up to \$125,000 per year. **Limited MAP Grant** awards will be for \$25,000 per year. **Subject to availability of funds, and further subject to annual satisfactory program evaluation, the awards will be for two years.**

Grant funds will be disbursed as follows:

**Full MAP Grants** - up to 3 months startup funding at the beginning of the funding cycle, followed by a monthly advance, beginning with month 4. These monthly advances will be triggered by submission of a monthly expenditures report detailing expenditures incurred in the previous month as well as satisfactory submission of operational reports.

**Limited MAP Grants** - \$10,000 upon award, with 3 quarterly payments of \$5,000 at the beginning of each subsequent quarter following award.

The Commission expects to receive more funding requests than can be awarded. Therefore, submission of a grant application does not guarantee receipt of an award. Additionally, grants that are funded may not be funded at their requested amount. The grant size may vary by circumstances, need and capability. The Commission reserves the right to conduct pre-award interviews, reference checks, and on-site assessments.

All **Full MAP** grant recipients are also required to participate in a state-level outcomes study and should budget 4-5 hours/month of staff time for this purpose. As part of the state-level outcomes study, evaluators (to be selected by the Commission) may require specific reports or information,

make periodic site visits and may conduct telephone interviews, as needed, to document program implementation and operation. As a condition of receiving a program grant award, the Commission requires that each **Full MAP** grantee submit all completed “Patient Evaluation Forms” at the end of each month to the Office of Research, Demonstrations and Rural Health Development, NCDHHS for a program evaluation by the Commission’s Outcomes Analysis team.

All **Full MAP** grantees are also required to submit monthly operating statistics in the format provided by the Commission. MARP will directly support the submission of such reports in the required format. Those grantees who elect to use alternative software will also be required to report in that format. All **Full** and **Limited MAP** grantees are also required to submit both an interim (6-month) and an annual progress and financial report to the Commission (user-friendly forms will be available on the Commission’s website). A final cumulative progress report and financial report will be due 30 days after the end of the grant period.

### *Use of Grant Funds*

Funds may be used for planning, staff salaries, project-related travel, supplies, a limited amount of equipment, and other direct expenses essential to the project. The Commission discourages the use of grant funds to pay indirect costs. Any allocated funds that are used to pay indirect costs must be clearly identified along with justification for the expense. Indirect costs include operating and maintaining buildings, grounds, and equipment; depreciation; administrative salaries; general telephone expenses; general travel; and general office supplies. Also, Commission funds may **not** be used for capital expenditures or equipment expenses over \$3,000 per unit. Computers, including laptops, are an acceptable expenditure with justification. Commission funds may not support any efforts to engage in any political activities or lobbying including, but not limited to, support of or opposition to candidates, ballot initiatives, referenda, or other similar activities. These funds may not be for research studies, unless this research is directly linked to evaluation purposes, or to substitute for funds currently supporting similar services.

### *Auditing and Reporting Requirements*

All grantees are required to comply with G.S. 143-6.1. Complete details are available at [www.ncauditor.net](http://www.ncauditor.net). In general this state law requires that all grant recipients that are nongovernmental entities and receive at least \$15,000 but less than \$300,000 in combined state funds annually, must file with each of the funding entities, a sworn accounting of receipts and expenditures of these funds. All grant recipients that are nongovernmental entities and receive \$300,000 or more in combined state funds annually, must file with the State Auditor and the funding entities an audited financial statement as prescribed by the State Auditor.

A single audit is required if a unit of government or public authority expends \$300,000 or more of combined state awards in either a federal program (such as a state match) or a state program. Nongovernmental entities are not required to perform a single audit; based only on state awards expenditures.

## **APPLICATION PROCESS**

The Commission has established an online application process for awarding funds under this Initiative. All applicants must submit a complete written application in order to be considered. Questions concerning application preparation should be submitted electronically or in writing to the Commission. Conference calls will be held in early March 2004 to answer any questions that applicants have in developing their proposals (please see timetable below for dates) as necessary. The HWTFC Staff and ORDRHD will discourage organizations from applying for a **Full MAP Grant** where they are clearly not qualified.

Applicants are strongly encouraged to use the online capabilities found at [www.hwtfc.org](http://www.hwtfc.org) for submitting applications; however, written applications will be accepted through the mail as well. Please contact the Commission to receive an application by mail. Mailed applications should contain three sets - an original plus two copies – to be mailed to the Commission. Faxed copies will not be accepted. All mailed proposals must be typed or printed in ink in 12-point type on 8 1/2” by 11” white or light colored paper. To the extent possible, applicants applying by mail should also provide an electronic copy in a format such as a formatted diskette or via e-mail using Microsoft Word.

Applicants will use different formats and forms for applying for a **Full MAP Grant** or **Limited MAP grant**. The **Full MAP Application is comprehensive, the Limited MAP grant application is brief (2 -3 pages)** and focuses on the specific services to be provided.

**Full MAP Application** The complete application should include the following sections:

Note: The Commission does not guarantee that any additional materials included as appendices will be considered in the review process.

- I. **The Applicant Organization:** Names, Addresses, and Contacts of the Applicant and Partners as required
- II. **Proposal Summary**  
Briefly summarize: the applicant organization, what your organizations views as the goals and objectives of the proposed project, and a description of how you propose to achieve those goals and objectives. Include the amount of funds requested. (**Two pages maximum**)
- III. **Total Two Year Budget Request**
- IV. **Proposal Detail:** The Applicant will answer a series of questions about:
  1. Organization Background
  2. Medication Management
  3. Prescription Assistance
  4. Patient Volumes
  5. Partnering and Collaborations

V. **Proposed Budget and Fiscal Information:** Submit a proposed program budget in the form found on the online application or distributed by HWTFC. Include line-item budgets with narratives to support the line items. .

VI. **Additional Materials – to be sent by mail or email:**

1. Letters of Agreement (consent) from all partnering entities
2. Letters of Support from collaborating individuals or organizations
3. Evidence of non-profit governmental status>VI Title and Certification Form: This is part of the application form. Please sign and mail to the Commission.

**Limited MAP Application** The Limited MAP applicants fill out a separate application on our website. The application generally consists of the same sections as the Full MAP Application described above. The content of the Proposal Detail is much briefer and there are no provisions for partnering with another organization.

Note: The Commission does not guarantee that any additional materials included as appendices will be considered in the review process.

## **REVIEW CRITERIA FOR APPLICATIONS**

Applications submitted in response to this RFP will be evaluated and ranked by an objective review panel of Commission members based on advice from Commission staff and outside experts. Proposals will be evaluated based upon the following criteria:

*Full MAP Applications:*

Organization Background: 30% of total score  
Medication Management: 15% of total score  
Prescription Assistance: 15% of total score  
Patient Volumes: 20% of total score  
Partnering and Collaborations: 10% of total score  
Budget and Fiscal Information: 10% of total score

*Limited MAP Applications:*

Organization Background: 30% of total score  
Services Provided: 30% of total score  
Patient Volumes: 20% of total score  
Collaborations: 10% of total score  
Budget and Fiscal Information: 10% of total score

## **TECHNICAL ASSISTANCE FOR APPLICANTS AND GRANT RECIPIENTS**

The Commission in coordination with the Office of Research, Demonstrations and Rural Health Development, NCDHHS will offer technical assistance to all Full MAP grantees during the

program implementation process. It is expected that funded agencies will share learning and resources in future years with partnership organizations in a train-the-trainer approach.

**DUE DATES AND PROGRAM TIMETABLE**

<b>February 24, 2004</b>	<b>RFP announcement</b>
<b>March 8 and 9, 2004</b> 3:00-4:30 PM	Technical Assistance conference calls for Limited MAP applicants  Pre-registration required: contact Sherry Heuser at <a href="mailto:sherry.heuser@ncmail.net">sherry.heuser@ncmail.net</a>  Email questions regarding the RFP to <a href="mailto:hwtfc@ncmail.net">hwtfc@ncmail.net</a>
<b>March 10 and 11, 2004</b> 3:00-4:30 PM	Technical Assistance conference calls for Full MAP applicants  Pre-registration required: contact Sherry Heuser at <a href="mailto:sherry.heuser@ncmail.net">sherry.heuser@ncmail.net</a>  Email questions regarding the RFP to <a href="mailto:hwtfc@ncmail.net">hwtfc@ncmail.net</a>
<b>March 22, 2004</b>	<b>APPLICATIONS DUE</b>
<b>March 22 - April 16, 2004</b>	Proposal Review Process
<b>Week of April 19, 2004</b>	Presentation of recommended applications to the REP Task Force, Health and Wellness Trust Fund Commission
<b>Week of April 26, 2004</b>	Presentation of proposed awards to the Health and Wellness Trust Fund Commission
<b>Week of May 3, 2004</b>	Awards announced



## **Medication Assistance Program Phase II: Frequently Asked Questions (FAQs)**

### Application:

Q: Does the character count for each response include spaces?

A: Yes, the character count includes all characters, including spaces.

Q: Section V, item C of the application requests a list of sub-recipients under the grant and a description of how funds will be disbursed to them. If an applicant organization is collaborating with other programs in the community, but not planning to give funds to those other programs, how should this question be addressed?

A: If an applicant organization is collaborating with other community programs on the project, but is not providing funding for the other community programs, this question is not applicable. However, the budget narrative (Section V, item A) should include a brief description of any in-kind contributions from other community organizations and the budget should include an accounting of the in-kind contributions.

Q: The MARP software does not accurately track the amount of \$AWP from last year. How should an applicant currently using this software in an existing MAP program determine this amount for the purpose of answering this question in the application?

A: MARP 2.0 is capable of retroactively pricing out entries that predate this latest version of software. The program will do this for any entries that have an AWP (Average Wholesale Price) value in the Clinical Pharmacology database that MARP uses to categorize, check contraindications of and price prescription drugs. Approximately 80% of all prescription entries would have an AWP and thus a reliable price to run against your entries and calculate costs for your proposal response.

Q: How will MAP II grant awards be administered and awarded to existing MAP I grantees?

A: If the MAP II grant is for the expansion of services covered under the MAP I grant, the new funds will be added to the existing grant. If the MAP II grant is for a significantly different program or service, a separate contract may be required.

Q: What is the deadline for the documents that cannot be electronically submitted?

A: Documents that cannot be submitted online or via email must be postmarked no later than 3/22/04.

Q: Is part III of the full MAP grant application just the dollar amount that we are seeking for the two years?

A: Part III is just the total budget request. Part V includes details about what is included in the request.

### Program design:

Q: Does the proposed program need to follow a specific design?

A: Proposed Full MAP programs must adhere to the design outlined in the RFP. Limited MAP applicants can propose innovative approaches to meet the community's Medication Assistance needs, and need not provide the full range of services.

Q: Can an existing MAP I grantee apply for additional funding through either a Full or Limited MAP application?

A: Yes, existing grantees can apply for either a Full MAP II or a Limited MAP II grant, depending on the size and design proposed expansion.

Q: Are there recommended staffing levels, based on program size?

A: There are no specific staffing level requirements. An experienced site can expect an initial prescription assistance only visit to last up to an hour and an initial medication management visit up to 90 minutes. Follow up visits will take less time since the initial data entry process and evaluation is already done with an average of less than 30 minutes for a follow up prescription assistance only visit, and just beyond that for a follow up medication management visit. Staffing combinations in terms of the distribution of Prescription Assistance Coordinator and Pharmacist time will also influence these figures.

Q: Can a program be designed to serve only low-income individuals, but not target seniors?

A: Yes, a Limited MAP proposal may be designed to target a specific population, disease or geographic area.

#### Coordination of services:

Q: Are programs required to serve individuals of all ages, even if another program in the county provides the same services for individuals over age 65?

A: If funding for services for a specific population already exists in a county or region, the proposal for the new program should not overlap or supplant the existing program, unless the population in need of such services is large enough to justify a second program. The proposed program services should ideally complement the existing program services. The second program could serve individuals up to the age of 65, at which point the original program would provide services.

Q: Can a county request funding for both a limited and a full program?

A: Yes, as long as the 2 programs serve distinct populations and do not overlap. One organization should not apply for both grants since applicants for Full MAP will automatically be considered for a Limited MAP grant if their Full MAP application is not approved

Q: If a medication assistance program already exists in a county, can another organization seek HWTFC MAP II grant funding to develop a second program for the same county?

A: Two medication assistance programs can exist in the same county or area (whether the first is funded by an HWTFC grant or not), as long as services are coordinated between the two organizations. The programs should serve different geographical areas or populations to avoid duplication of or gaps in services. Proposals should outline how new services wrap around or enhance any existing services.

Q: Can a proposal be from a single organization or a collaborative effort of multiple organizations?

A: Collaborative grant proposals will be considered. For Full MAP programs, collaborations are strongly encouraged.

Q: Can an existing HWTFC MAP grantee apply for additional funds?

A: Existing grantees may apply for additional funds to expand staffing (add staff or make a part-time staff full-time), provide services to more individuals, expand the type of services available, or expand the geographical area served. Existing HWTFC grantees will be considered for additional Full or Limited MAP II funding if services are expanded into an additional county or the need for additional resources in the counties currently covered is evident (through waiting lists etc.) .

#### Use of grant funds:

Q: Can grant funds be used to purchase medications?

A: MAP grant funding through the HWTFC should be used to pay for staffing, etc. to provide the service, but not to purchase medications.

Q: Can personnel fringe benefits be included in the grant?

A: Fringe benefits for employees paid by the grant may be included in the personnel line of the budget. The budget narrative should specify the salary and benefits amounts.

Q: What can the grant funds purchase?

A: Grant funds may cover salaries and benefits and other staffing costs, as well as reasonable travel, office supplies, hardware etc. However, applicants are strongly discouraged from requesting funds to cover indirect costs or to purchase medications.

Q: If awarded, when will grant funding begin?

A: Grant funding will follow the State Fiscal Year: July 1, 2004-June 30, 2006.

Q: What period of time will the grants cover?

A: The grants will be awarded for two years, unless requested for one year only. Renewal of the grant after one year is based on satisfactory performance and proper fiscal and programmatic reporting.