



2009C Oral Health

MeHAF Strategic Priority: Strengthening the Safety Net

**Expanding Maine's Oral Health Safety Net
Capacity**

Request for Proposals (RFP)

Issue Date – May 8, 2009

Due Date – June 19, 2009

Maine Health Access Foundation
150 Capitol Street, Suite 4
Augusta, ME 04330
(207) 620-8266
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KEY DATES AND DEADLINES FOR 2009C PLANNING GRANTS	
RFP Released	May 8, 2009
Q&A Conference Calls	No registration required.
<ul style="list-style-type: none"> ▪ May 22, 2009, 11:00-12:00 noon ▪ June 5, 2009, 1:00-2:00 pm 	Conference Call Number: 1-866-866-2244 Participant Number: 5059682#
Full Proposals Due*	June 19, 2009
Grants Announced	On or about August 24, 2009
Grant Period	October 1, 2009-September 30, 2009
* Please note proposals must be <u>received</u> at MeHAF by 4:30 p.m. on the due date	

PROJECT FOCUS and FUNDING PRIORITY

The Maine Health Access Foundation (MeHAF) is issuing a request for proposals (RFP) through its strategic priority to *Strengthen the Safety Net*. This new RFP will support Safety Net oral health providers to purchase and upgrade equipment, renovate space, perform capital project planning, and/or purchase and implement new software to expand their capacity to provide services to MeHAF's target population: people who are uninsured and medically underserved.

ORGANIZATIONAL ELIGIBILITY

Eligible organizations include 501(c)(3) tax-exempt public charities, governmental or other public, non-profit entities. Individuals, fiscal sponsorships, organizations with pending 501(c)(3) tax-exempt status, and private foundations are ineligible. NOTE: The Maine Health Access Foundation has specific requirements for public charity applicants that are operating under subsection 509(a)(1), (2), or are functionally integrated under subsection (3) of the Internal Revenue Code. Please examine your final 501(c)(3) determination letter to identify if you are affected. Additional information is outlined in Appendix A, page 9.

FUNDING AVAILABILITY

Organizations may request one-year grants of \$15,000 - \$50,000. A total of \$200,000 is available for grants in 2009.

QUESTIONS

Please contact Barbara Leonard, Vice President for Programs, bleonard@mehaf.org or by phone at (207) 620-8266, ext. 102.

A list of frequently asked questions and MeHAF responses will be posted on the MeHAF website during the week of May 25 and will be updated early in the week of June 8.

THE MAINE HEALTH ACCESS FOUNDATION (MeHAF) MISSION

The mission of the Maine Health Access Foundation is to promote affordable and timely access to comprehensive quality health care, and improve the health of every Maine resident.

MeHAF is a mission-driven and results-oriented organization that uses grants and other program support to advance strategic solutions to Maine's health care needs, particularly for persons who are uninsured and medically underserved.

MeHAF's PRIORITY TO STRENGTHEN MAINE'S SAFETY NET

MeHAF is committed to attaining universal access to care – including oral health – for every person in Maine. MeHAF has advanced a diverse portfolio of programs to strengthen Maine's safety net to meet the needs of individuals who are uninsured and medically underserved.

FUNDING OPPORTUNITY

Overview: Access to oral health care is critical to ensuring overall health. Oral health status impacts individuals' abilities to communicate and function at home, work, and school. Oral health appears to be a contributing factor in other health conditions, such as heart disease, lung disease, diabetes, and adverse outcomes from pregnancy. Low income individuals and those who lack dental insurance are at highest risk of not obtaining services.

Against a backdrop of disparities, insurance gaps, declining numbers of oral health professionals, and scant access to care in rural regions, MeHAF has invested over \$2 million in oral health care in Maine since 2002. MeHAF's investments have ranged from equipment, personnel and start-up costs of oral health clinics to initiatives that examine oral health policy and develop strategies to increase access to oral health care. Throughout this period, MeHAF has made a commitment to ensuring access to definitive services—not only preventive services—so that those who receive care are fully served.

Two recent publications in Maine make clear recommendations about the need to improve oral health in the state. The 2007 Maine Oral Health Improvement Plan lists goals which include improving the current [oral health care] system infrastructure. The Report of the Governor's Task Force on Expanding Access to Oral Health Care for Maine People (December 1, 2008) includes recommendations such as implementing financial strategies to enhance access to comprehensive oral health services that enable providers to upgrade or replace aging equipment.

The American Association of Public Health Dentistry underscores these recommendations in its recent draft position statement on health care reform.¹ It states that health care reform must include oral health care reform as an integral component. A key element of the position statement are that high quality and affordable personal oral health services should be available for all Americans.

¹ To be formally adopted at the National Oral Health Conference on April 21, 2009.

In order to support Maine's oral health safety net and to help achieve the recommendations described above, MeHAF will provide funding to support one or more of the following purposes:

- Purchasing and upgrading equipment;
- Renovating space;
- Purchasing and implementing new clinical software or upgrading existing clinical software;
- Capital project planning.

Funding will address the overall goal of expanding capacity to provide services to low-income individuals. **Funding priority will be placed on organizations that provide oral health services that have not benefited from or are not eligible for direct funding through the American Recovery and Reinvestment Act (ARRA).**

Organizations that have multiple service delivery sites may submit up to two applications for separate and distinct projects. No single organization will be awarded more than 30% of the total available under this RFP.

APPLYING FOR A GRANT

A. Format Requirements

- 1) The proposal may not exceed five pages (exclusive of coversheet, budget and budget narrative, and all required attachments).
- 2) The proposal must be submitted on 8 ½ x 11 sheets (one side only) with margins of at least ¾ inch on all sides and in a type face no smaller than 12 point.
- 3) Proposals may be single- or double-spaced.
- 4) Each page of the proposal must include a header in the upper right-hand corner with the applying organization's name and the page number.
- 5) If MeHAF is unable to fund a particular proposal, we may share the proposal with other funders with interest in oral health issues. If you would prefer us not to do so, please indicate this in a cover letter to accompany the proposal.

B. Proposal Content and Scoring: The proposal must contain the following sections.

1) *Grant Summary Form*

- a) Fill out the grant summary form and provide the required attachments:
 - (1) 501(c)(3) determination letter
 - (a) 509(a)(3) documents, if applicable
 - (2) Your organizational non-discrimination policy

2) *Organizational Mission and Service Delivery Site Description (Not scored)*

- 1) Tell us about your organization, your current programs and activities, and the population group you typically serve.
- 2) Describe the service delivery site, services provided, current patient demographics, volume, and payer mix.

3) Proposal Elements (40 Points)

Provide a brief description of what you propose to do and why. Proposals may include one or more elements listed below. Please include the required information for each element in your proposal narrative. If your organization is submitting applications for multiple sites, briefly describe how and the extent to which the projects will be integrated or mutually supportive. Include this information in each application.

➤ ***Purchasing and Upgrading Equipment***

Explain your current situation and why you have a need for new or upgraded equipment, and/or why new equipment has not been purchased or older equipment upgraded. We encourage leveraging of other funds, such as equipment loan funds, for proposed projects. Please provide two price quotes to support your budget request.

➤ ***Renovating Space***

Explain why your current space does not meet your needs, or allow you to provide expanded services to low-income individuals. Will the renovation increase/improve access to individuals with disabilities? Please provide two price quotes to support your budget request.

➤ ***Purchasing and Implementing Software***

Explain how the implementation of new tools, such as software, will enhance your capacity to serve low-income individuals. Please provide two price quotes to support your budget request.

➤ ***Capital Project Planning***

Explain your need for the proposed capital project. Will this be a new space, or additional space? Describe the proposed planning process. Who will lead the planning, and what are the qualifications of the individual or organization (if the work is to be contracted out). Describe your overall fundraising plan, including timeframe, other anticipated contributors, and total amount to be raised. Will your capital project incorporate energy efficiency components?

4) Priority Population (25 Points)

How many uninsured/medically underserved individuals does your organization serve? How will the proposed project element(s) expand your capacity to provide services to low-income individuals? How many will receive new services, and/or how many new people will be served?

5) Staffing (20 Points)

What is your current staffing structure? Are there sufficient oral health professionals, including dentists, to deliver planned services? Is this an appropriate level given the project element(s) outlined above, or will you change the number or type of staff? **MeHAF will not award grants if appropriate staffing is not in place.**

6) Budget and Budget Justification (15 Points)

- 1) Fill out the budget form and create a short budget narrative that explains how your organization will use MeHAF funds to support your ability to provide oral health services to low-income individuals. Provide a brief explanation for each line item in the request.
- 2) MeHAF requires all grantees to contribute or secure a minimum level of cash or in-kind support. The minimum required amount is based on the size of an organization's annual budget and the amount of the requested MeHAF portion of the project budget (see chart below).
- 3) MeHAF will accept any combination of cash and in-kind to meet the requirement:

- a) A cash match may be drawn from general operating funds or complementary grants received from other sources for the project proposed to MeHAF.
- b) An in-kind match may be derived from contributions to the project in forms other than cash (such as employee time or supplies) supplied by the applicant or key partners on the project.
- c) In compelling circumstances, a waiver of the contribution requirement may be made by MeHAF program staff. Please contact Vice President for Programs Barbara Leonard (bleonard@mehaf.org) if a waiver is sought.
- d) The Maine Health Access Foundation has specific requirements for the presentation and calculation of direct and indirect cost, as described in *Appendix B* (page 10).

MeHAF GRANT MATCH REQUIREMENT	
SIZE OF ORGANIZATION'S ANNUAL BUDGET	PROPORTION OF REQUESTED MeHAF FUNDS FOR PROJECT REQUIRED FROM CASH OR IN-KIND SUPPORT
≤ \$250,000 - \$1 million	5%
\$1 million - \$5 million	10%
\$5 million - \$10 million	15%
≥ \$10 million	20%

C. Submission Requirements

Submit five sets (one original and four copies) of the proposal and attachments listed below in numbers 1 - 4. Please clip (do not staple) the original to facilitate making extra copies. Each set should include the following documents in this order:

- 1) Grant summary form
- 2) Proposal (maximum of five pages)
- 3) Project budget and budget justification
- 4) Two price quotes for the proposed project element.
- 5) If you have not previously submitted these documents as part of an application through another MeHAF application since January 1, 2009, please submit **one (1)** copy with your original set of application documents:
 - a) Board list
 - b) Audited financials or IRS Form 990, as instructed previously
 - c) Non-discrimination policy; and
 - d) Written statements of confidentiality and IRB approval procedures, if applicable.

Submit by regular mail, overnight courier, or by hand to:

Catherine Luce
Grants Manager
Maine Health Access Foundation
150 Capitol Street, Suite 4
Augusta, ME 04330

All proposals and related documents must be received on or before **4:30 p.m. on June 19, 2009**. Deliveries by hand must be received by a Foundation staff member by the deadline. **Submissions will not be accepted electronically or by fax.**

D. Applicant Notification

Applicants will be notified of the Foundation's decision on or about August 24, 2009.

PROPOSAL REVIEW AND FUNDING DECISIONS

MeHAF is committed to a thorough and fair review of all applications. The Foundation has strict and comprehensive conflict of interest policies regulating the participation of its staff, Trustees, Community Advisory Committee members, and external reviewers, in funding decisions. It also assures an impartial and rigorous process by including a range of qualified individuals in its grantmaking decisions. As part of the evaluation process, MeHAF may contact an applicant for written clarification of particular proposal elements.

Full proposals are ranked by reviewer recommendations and presented to the Foundation's Grants Committee. The Committee carefully reviews these recommendations and based on this information, develops a slate of grants that is forwarded to the full Board for final approval.

QUESTIONS

Applicants are encouraged to contact MeHAF staff as they develop their proposals. Guidance and clarification of RFP requirements can help ensure a stronger application.

Please contact:

Barbara Leonard, Vice President for Programs, bleonard@mehaf.org, or (207) 620-8266, ext. 102.

APPLICATION CHECKLIST

- Application **received** by MeHAF on or before 4:30 p.m. June 19, 2009.
- Five sets (one original and four copies) of materials listed below in order. Please securely clip the original and staple the copies.
 - Grant summary form
 - Proposal (maximum of five pages)
 - Project budget and budget justification
- One set of the following required attachments to be included with the original if not already submitted as part of another MeHAF RFP application since January 1, 2009:
 - Board list
 - Nondiscrimination policy
 - Audited Financials or IRS Form 990
- Submit by regular mail, overnight courier, or by hand.
 - Deliveries by hand must be **received** by a Foundation staff member no later than 4:30 p.m. on June 19, 2009. **Submissions will not be accepted electronically or by fax.**
- Submit to: Catherine Luce
Grants Manager
Maine Health Access Foundation
150 Capitol Street, Suite 4
Augusta, ME 04330

APPENDIX A
Requirements for Public Charity Grantees Operating Under Subsection 509(a)(3)

The Maine Health Access Foundation has the following requirements for public charity grantees that are operating under subsection 509(a)(3).

MeHAF will rely on its own research through a current GuideStar search to determine whether the grantee derives its public charity status under section 509(a)(3) of the Code. Each section 509(a)(3) grantee must establish to MeHAF's satisfaction its status as a Type I, Type II, or Functionally Integrated Type III supporting organization. MeHAF's policy is not to make grants to Type III supporting organizations that cannot establish functional integration with their supported organization(s). Therefore, any grant applicant whose IRS determination letter indicates section 509(a)(3) status must provide the following additional information:

Type I and Type II supporting organizations must submit the following documents:

- Written representation, signed by an officer, director or trustee of the grantee, stating that the organization is a Type I or Type II supporting organization and including:
 - A description of how the grantee's officers, directors or trustees are selected with references to any provisions in governing documents that establish a Type I or Type II relationship between the applicant and its supported organization(s); and
 - Copies of such governing documents. [The Foundation is then required to review these documents, in accordance with instructions from our attorney, to be sure that they support the written statement.]

Functionally Integrated Type III supporting organizations must submit the following documents:

- Written representation, signed by an officer, director or trustee, stating that the grantee is a Functionally Integrated Type III supporting organization including:
 - Identification of the one or more supported organizations with which the grantee is functionally integrated; and
 - Copies of any governing documents relevant to the relationship of the grantee to its supported organization(s), and
 - Written representation(s), signed by an officer, director or trustee of each supported organization, representing that the grantee is functionally integrated, describing the activities of the grantee, and stating that but for the involvement of the grantee engaging in activities to perform the functions of, or to carry out the purposes of, the supported organization, the supported organization would normally be engaged in those activities itself. [The Foundation is then required to review these documents, in accordance with instructions from our attorney, to be sure that they support the written statement.]

Required documents must be submitted with grant proposals.

These requirements are based on current legal advice, and may change in light of subsequent IRS rulings.

APPENDIX B

MeHAF's Indirect Cost Policy

The Maine Health Access Foundation (MeHAF) has established the following policy guideline for grant applicants related to indirect cost.

MeHAF offers funding for both “direct” and “indirect costs” associated with all funded projects except for Discretionary Grants, and in very unusual circumstances, other grants as may be specified by the Foundation.

“Direct costs” are those costs directly related to the design, planning and implementation of a particular project. MeHAF allows the following costs directly related to the project:

- Salaries and benefits of project and administrative personnel who assist or manage;
- Subcontractors, consultants, or professional services;
- Equipment: Purchase or Maintenance
- Equipment or Facilities: Rental
- Office Supplies
- Program Materials
- Postage & Courier
- Printing & Copying
- Rent
- Stipends and Honoraria
- Telephone & Internet
- Travel: Local
- Travel: Other
- Utilities
- Other costs directly related to the project (with Foundation approval; include on budget form)

In some cases, the calculation of direct costs is straightforward: for example, the portion of staff FTE, expressed as a percentage of salaries and benefits, devoted to a funded project, or materials, such as pamphlets, used exclusively for a funded project. In other cases, such as telephone costs, a reasonable formula may need to be developed. For example, if an agency has five projects with roughly equal telephone usage, it would be reasonable to allocate 1/5 of telephone expenses to each project. Direct costs should be presented on the MeHAF budget form, and their rationale and method of calculation should be explained in the proposal in the budget justification.

“Indirect costs” are costs which are incurred by an organization in the execution of its activities but which cannot be readily identified with a particular activity. Indirect costs include general overhead costs, such as bank, payroll processing and audit fees; liability insurance; office equipment purchase or maintenance not directly related to the project; and salaries and benefits of executive or administrative personnel who are not directly engaged in the project. Organizations may request an indirect cost rate of up to 15%. This should be calculated on the MeHAF budget form as all direct expenses multiplied by the requested rate.

Please note that both direct and indirect costs must be contained within the total amount requested, and taken together, may not exceed any specific maximum request amount.