WEST VIRGINIA Department of Health & Human Resources
BUREAU FOR PUBLIC HEALTH
Center for Local Health

Call for Proposals: Local Board of Health Emergency Fund

Summary

The West Virginia Legislature appropriates funds for basic public health services each year which are distributed to local boards of health by the Center for Local Health. W.Va. Code R §64-67-4 permits the Commissioner of the Bureau for Public Health (BPH) to withhold up to two percent (2%) of basic public health funds, prior to applying the funding formula, to be set aside in an emergency fund. W.Va. Code R §64-67-5 defines the use of the emergency fund by the Commissioner to assist local boards of health to meet unanticipated financial emergencies.

Between FY 2008 and FY 2012, median per capita state spending on public health nationally decreased from $33.71 to $27.40 (Trust for America's Health, 2013). In West Virginia, state agencies have received cuts to their budgets annually over the last four years and the state's projected deficit is $381,039,000 for FY2016 (West Virginia Office of the Governor, 2016). In addition, federal funding to BPH for traditional public health programs has decreased significantly. For example, Public Health Emergency Preparedness (PHEP) funding has declined since 2002 resulting in a 47% reduction of funds for West Virginia. At the local level, primary care centers received a 41% reduction in funding and free clinics received a 32% reduction in funding in FY2016 (West Virginia State Budget Office, 2015) in addition to a new funding formula.

The Governor's FY2017 Proposed Budget includes a 24% reduction in State Aid for Basic Public Health Services. These funding changes and challenges require not just adaptation, but strategic reinvention of how the public health system in West Virginia targets public dollars for public goods and how the system can leverage the efficiencies and opportunities brought about by the shift to a population health focus. The emergency fund is available for local boards of health that wish to explore, plan, implement or improve agency operations through cost savings or revenue generation. The emergency fund must be used in the provision of basic public health services. Eligible applications must be submitted by a local board of health chair and local health officer or his/her designee. Funded projects are anticipated to begin May 15, 2016.

Awards may be made for less than the requested amount and will be subject to funding availability. Selected project teams are expected to work with Center staff, who will provide technical assistance during the implementation of the projects, and to be available to share the results and lessons learned from their projects with appropriate audiences including local boards of health, county commissions and the state legislature. Priority for funding will be given to applications that address systematic efforts to sustain and improve the delivery of basic public health services through cost-efficiencies and revenue-generation.

I. Background

Public health needs, service delivery, funding strategies and the conceptual frameworks that drive progress in health outcomes are transforming rapidly. With chronic disease as the primary cause of

morbidity and mortality and the expansion of the insured population, public health agencies must evolve to adapt and meet the needs of partners, payers and the community in efforts to improve health. West Virginia's local health departments have significant variation in administrative costs; collection, reporting and delivery of public health data and services; and revenue generation, suggesting that services and funding may not be effectively targeted statewide, for the greatest impact on health outcomes, and according to consistent evidence-based standards. These challenges are reflected nationally and are not unique to West Virginia.

In December of 2015, the Public Health Impact Task Force (PHITF), commissioned by Dr. Rahul Gupta, MD, MPH, FACP, unanimously adopted 6 core concepts outlined below. This call for proposals directly supports the implementation of PHITF concepts 1-5 through the following:

1. *Maintain a local health presence and services in every county*: This proposal is structured to support the sustainable delivery of basic public health services in every community to a consistent standard.

2. *Partner with stakeholders to align West Virginia's public health system with national recommendations by developing a minimum package of public health services accessible to all West Virginians*: One of the priority areas of the proposal is to explore the validity of the current list of basic public health services in light of public health system changes over the past 20 years.

3. *The State's public policy should support a public health system that is accreditation-ready*: Projects that focus on accreditation readiness areas that are focused on operational efficiencies and/or reduction of administrative costs (for example, through quality improvement projects) are included in the scope of this announcement.

4. *Conduct an assessment of the current system (state and local) responsible for the provision of statewide basic public health services including funding and revenue sources*: Project proposals and results will be used to construct a statewide assessment of ways in which local health departments demonstrate value and ways in which local health departments are focusing on cost efficiencies and revenue generation.

5. *The State's public policy should encourage the efficient and effective use of public resources that support statewide public health services*: This concept is the key driver of the use of the emergency fund. Regardless of the proposed budget reduction, the efficient and effective use of public resources is critical to the sustainability of West Virginia's local health departments.

6. *A Public Health Advisory Board should be established to improve transparency, accountability, and efficiency and promote a statewide culture of health.*

BPH has supported, and will continue to support, revenue-generation and cost-savings initiatives in local health departments including through the immunization billing project, *Try This WV* mini-grants, the Environmental Health Electronic Reporting System, electronic disease and lab reporting, cross-

jurisdictional sharing of services, pilot projects for chronic disease prevention, Diabetes Self-Management Education and trainings on quality improvement, budgeting, Quick Books, financial management, among others. Potential applicants for this funding opportunity are strongly encouraged to familiarize themselves with these previous initiatives as well as current opportunities supported by national and local funding.

II. Priority Learning Areas

The Call for Applications is developed in alignment with the PHITF Core Concepts which states that the *State's public policy should encourage the efficient and effective use of public resources that support statewide public health services.* One of the goals of projects funded through emergency funds is to learn about the current practices and future strategies related to cost-efficiencies and revenue-generation in local boards of health. The issues targeted as *priority learning areas* through this funding opportunity are the following:

a) Increasing cost-effectiveness while maintaining or improving the quality of basic public health service provision
b) Increasing revenue-generation that will be invested in public health infrastructure
c) Supporting cross-jurisdictional sharing activities at the local level.
d) Improving overall public health system performance specific to the provision of basic public health services.

III. Eligibility and Prerequisites

To be eligible for this award, the applicant organization must be:

- One or more local boards of health in West Virginia

IV. Selection Criteria

In order to ensure that the fund is targeted to sustain and improve the delivery of basic public health services, this statewide Call for Applications is focused on two areas:

a) projects that increase cost-effectiveness while maintaining or improving the quality of basic public health service provision
b) projects that increase revenue-generation that will be invested in public health infrastructure

Applications should reference the following characteristics in their proposal narrative and attachments. Applications will be scored according to these characteristics:

- The application demonstrates a financial emergency.
- The application demonstrates use of the funds to support the provision of basic public health services.
- The project goals are consistent with the Public Health Impact Task Force Recommendations.
- The application identifies possible challenges and realistic, effective strategies to overcome them.
- The proposed activities are appropriate for achieving the project goals.

- Measures of success are clear, relevant to the project's stated goals, and can be realistically achieved within the timeframe.
- Letters of support demonstrate a commitment to improving the effectiveness and efficiency of the involved public health agencies.
- The composition of the project team and how they will be engaged are appropriate and will assist with the successful completion of project activities.
- The applicant organization has the capacity to complete the project in a timely manner.
- The proposed budget and timeline are appropriate for the completion of the project activities.
- Preference will be given to proposals that help advance the Center's *Priority Learning Areas* as described in Section II of this document.

Please Note: *Only documentation that is requested in the application will be reviewed.*

V. Awardee Expectations

- Awardees are expected to meet requirements for the submission of periodic information needed for overall monitoring and management of performance. At the close of each award period, the awardee organization is expected to provide a financial report and a brief written report on the project and its findings.
- Awardees must be willing to share project lessons learned with peers in their own states and nationally via reports, webinars, and/or presentations, as well as to work with Center staff on developing a brief story about their project.

VI. Use of Funds

Funds can be used for project activities leading to the establishment or implementation of cost-efficiency or revenue generation, including project staff salaries, meetings, supplies, project-related travel, and other direct project expenses. Equipment purchases and indirect costs are not allowable.

Funds may not be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, or as a substitute for funds currently being used to support similar activities. No capital renovations or facility expansion will be supported through this funding.

VII. How to Apply

Proposals must be submitted via email to dhhrbphclh@wv.gov using the application available on the CLH website (www.dhhr.wv.gov/localhealth/) on the homepage under *News and Events/Emergency Fund Application*. One organization for each project will serve as the lead organization (and funding recipient).

The proposal narrative should be no more than five pages (with minimum 12-point font and one-inch margins) and include the following:

- A description of the project being considered, why it was chosen (project need) and its relation to the PHITF recommendations.
- A description of the Center's priority learning area(s) that the project targets (See Section II above).
- The project's goal and corresponding activities.
- Measures of success.
- A list of project team members (including their names, titles, and organizational affiliation) in addition to a brief description of how they will be involved in the project.
- Potential challenges that will be faced during the grant period and strategies to address and overcome them.

In addition to the proposal narrative, applicant must also submit:

- A project timeline
- A budget
- A budget narrative
- Letter(s) of commitment from the applicant's County Commission and from the Board of Health and County Commission of any associated jurisdictions. The letters should reflect a commitment to improving the efficiency and effectiveness of public health services through increased cost-savings or revenue generation. Form letters will not be accepted. Applications from multiple boards to enhance efficiencies and capacity are strongly encouraged.

Proposals can be submitted starting on March 21 and must be submitted no later than 5 p.m. on April 15, 2016. Please submit proposals and direct inquiries to dhhrbphclh@wv.gov.

The review process will be coordinated by the Center for Local Health with a final determination to be made by the Commissioner. Individual critiques of proposals submitted will not be provided.

VIII. Program Direction

General contact information is as follows:
Center for Local Health
C/O Emergency Fund
350 Capitol Street
Room 515
Charleston WV 25301
Phone: (304) 558-8870
E-mail: dhhrbphclh@wv.gov
Website: www.dhhr.wv.gov/localhealth/