



Request for Proposals (RFP):

Implementation of NACHC's Diabetes Prevention and Management Program:
A National, Virtual Model for Delivering the National Diabetes Prevention
Program to Individuals with/at-Risk for Diabetes

RFP Released: July 9, 2021

Proposals Due: August 15, 2021

Points of Contact

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Organization Overview

The [National Association of Community Health Centers](#) (NACHC) was founded in 1971 to “promote the provision of high quality, comprehensive and affordable health care that is coordinated, culturally and linguistically competent, and community directed for all medically underserved populations.”

NACHC:

- Serves as the leading national advocacy organization in support of community-based health centers and the expansion of health care access for the medically underserved and uninsured.
- Conducts research and analysis that informs both the public and private sectors about the work of health centers, their value to the American health care system and the overall health of the nation’s people and communities – both in terms of costs and health care outcomes.
- Provides training and technical assistance to support and strengthen health center operations, clinical quality, leadership development and governing Boards of Directors at health centers across the country.
- Develops partnerships with the public and private sectors to build stronger and healthier communities.

Purpose

NACHC assists existing and potential health centers in addressing clinical and operational demands while sustaining their health care access mission, a community governance model and a commitment to cultural and linguistic competence in healthcare delivery to underserved and vulnerable populations. Through a diverse cadre of subject matter experts and delivery venues, NACHC is highly utilized and well prepared to respond to emerging healthcare delivery issues. Specifically, NACHC maintains a professional cadre of experts to provide health center professionals with quality instruction and technical assistance resources based on adult learning principles, advanced instructional design and an understanding and application of technology to enhance delivery of training and technical assistance. The U.S. Health Resources and Services Administration (HRSA) provides resource support to NACHC to improve health center operational and clinical outcomes through the provision of coordinated, collaborative training and technical assistance.

RFP Services Desired

To improve diabetes control among health center patients while also tackling diabetes prevention - an issue of critical national importance - NACHC has launched a patient-centered strategy for diabetes control and prevention. This program will follow the Center for Disease Control's (CDC) approved lifestyle management program, the National Diabetes Prevention Program (NDPP). The NDPP provides patients a curriculum that addresses healthy eating, physical activity, and stress management through regular group meetings and support over the course of a year – an approach that can benefit both individuals at-risk for diabetes as well as those with diabetes. Studies show that the NDPP curriculum, delivered in-person or online (virtually), can effectively help participants lose weight, improve healthy behaviors, and cut their risk of developing diabetes in half. If delivered virtually, as proposed in NACHC's program, patients otherwise without access to a local DPP will be able to participate. In addition to offering NDPP's lifestyle management curriculum to individual with diabetes and at-risk of diabetes, NACHC's program will provide participants with a set of self-care tools to assist with healthy living and diabetes control and prevention and education and training that includes attention to health equity and social support.

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

NACHC's national, virtual lifestyle management program targets patients with diabetes whose HbA1c is greater than 9% and their family members with risk factors for diabetes (e.g., overweight/obese) and/or prediabetic. The program's robust design includes collaboration with primary care associations (PCAs), health center-controlled networks (HCCNs), and health centers. Through this national, coordinated model, NACHC and partner PCAs/HCCNs, will work together with health center staff in administering the CDC-approved curriculum online for a cohort of patients with diabetes and their at-risk/pre-diabetic family members. Health Center Lifestyle Coaches will support enrolled patients with measurement, monitoring, and follow up requirements. NACHC will work with all program partners to develop policies and procedures for patient safety and privacy. As part of launch efforts, NACHC has submitted an application to the CDC for NDPP recognition (a multi-year process that requires demonstrating successful implementation in a cohort of individuals). This national initiative allows NACHC to develop and test a national prototype for addressing diabetes control and prevention, which can then be distributed and disseminated nationally to PCAs/HCCNs and health centers.

Through this Request for Proposal (RFP), NACHC is seeking:

1. One (1) National Program Lifestyle Coach to oversee delivery of the CDC Prevent T2 curriculum and NACHC's national program content and coordinate program activities between NACHC, Hub Lifestyle Coaches, and Health Center Lifestyle Coaches.
2. Three (3) PCAs and/or HCCNs, each to serve as an organizing 'Hub'; each hub recruits 2-4 health centers.
3. One (1) organizational entity offering a HIPAA compliant online data collection platform and mobile app with a proven track record of use with the NDPP. The platform/tool should include the ability for program participants to upload data, engage with peers, and join National DPP sessions.
4. One (1) organizational entity certified by the Centers for Disease Control and Prevention to deliver training for Lifestyle Coaches.
5. One (1) technical writer to create and/or edit project documentation such as training materials, project summaries, etc.
6. One (1) graphic designer to create branding materials to be used across project documents and online platform.

National Program Lifestyle Coach Role:

NACHC will engage a trained and experienced NDPP Lifestyle Coach to oversee delivery of the CDC Prevent T2 curriculum and NACHC's national program content and coordinate program activities between NACHC, Hub Lifestyle Coaches, and Health Center Lifestyle Coaches. Responsibilities include:

- Deliver CDC's Prevent T2 curriculum in coordination with each of the three (3) PCA/HCCN Hubs (sessions that reach 2-4 health centers per Hub).
- Incorporate discussion and use of patient self-care tools provided to patients participating in the NDPP.
- Provide support to Hub and Health Center Lifestyle Coaches, including coaching in:
 - Foundational lifestyle coaching and the CDC Prevent T2 curriculum.
 - NACHC's Diabetes Prevention and Management Program including:
 - The overall program and infrastructure
 - NACHC's program curriculum that includes considerations around health equity, individuals with diabetes, and social support structures

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

- Health recruitment/referral and enrollment processes
 - Program delivery logistics, including patient self-care tools provided to participating patients, and training on the virtual platform
 - Data collection processes including collection/submission and communication.
- Create workflows for a centralized, HIPAA-compliant process for collecting data for CDC's DPRP Recognition.
- Design centralized referral, recruitment, and enrollment processes to be implemented at the local level. This includes tools/materials and resources to assist in, and support, local, regional, and health center referral and recruitment processes.
- Ensure ongoing quality assurance across all regions through a regular review of program progress and data and as it is submitted; address any gaps/issues as they arise.
- Address and facilitate resolution of issues and challenges encountered by Hub and Health Center Lifestyle Coaches.

PCA/HCCN Role

The selected PCAs/HCCNs will play a key role in operationalization of this national strategy. Key areas of PCA/HCCN Hub responsibility include:

- Identify one staff member to receive initial and ongoing training as a Lifestyle Coach.
- Recruit 2-4 health centers to participate in the national program and delivery of the NDPP curriculum to a cohort of patients.
- Coordinate with the NACHC program team and National Program Lifestyle Coach around health center recruitment, referral, enrollment, communication, and data collection/submission.
- Work with 2-4 selected health centers, having each identify two (2) staff to be trained as a Lifestyle Coach. Each Health Center Lifestyle Coach will enroll up to 12 eligible patients, at least half of whom meet NDPP criteria of 'at-risk' for diabetes; the remainder of the cohort will include individuals with diabetes.
- Support delivery of the NDPP and NACHC program curriculum.
- Support health centers in collection and submission of data to NACHC's NDPP National Lifestyle Coach utilizing HIPAA compliant processes.
- Create processes to ensure participant data/progress is shared in a HIPAA compliant manner, and with patient's permission, with participants' respective referring health center/provider.

Health Center Role

Health center will work with PCA/HCCN Hubs to designate at least two (2) staff who will trained as a Lifestyle Coach.

Health Center Lifestyle Coaches will:

- Receive CDC-approved training to become an approved NDPP Lifestyle Coach.
- Work with the Hub Lifestyle Coach to identify, recruit, and enroll up to 12 eligible patients from their health center, at least half of whom meet NDPP criteria of 'at-risk' for diabetes; the remainder will include individuals with diabetes. Ensure all participating patients have clearance from their provider and, if necessary, have signed liability waivers around participating.
- Contribute to the delivery of CDC's Prevent T2 curriculum to participating patients.

- Receive training for NACHC's Diabetes Management and Prevention Program, including workflows, data collection and reporting requirements.
- Train participants in use of the self-care tools provided to patients participating in this program (home A1c test, blood pressure monitor, thermometer, pulse oximeter, and scale).
- Participate in monthly program huddles that include other Health Center Lifestyle Coaches, Hub Lifestyle Coaches, and NACHC staff/consultants as part of a national peer network of Health Center Program staff working to support diabetes prevention and control.
- Establish workflows and communication channels to connect patient's program activity to care received by the health center's care team/provider.
- Provide program participants with community resources and support to address needs, including resource lists such as safe walking paths, local farmer's markets, and food shelves.
- Ensure participant specific data is entered into the patient's health record and share information with the participant's care team, as appropriate.
- Provide participant updates to referring providers as appropriate and as agreed upon by the participants.

Vendor of Lifestyle Coach Training Program

This vendor will be an entity that is able to provide foundational training through a virtual modality for approximately twenty (20) lifestyle coaches and other staff involved in NACHC's Diabetes Management and Prevention Program, per CDC DPRP standards. The vendor will also meet one of the following criteria:

1. A training entity that has an MOU with CDC and is listed on the CDC website (found here: <https://nationaldppCustomer Service Center.cdc.gov/s/article/Training-for-your-LifestyleCoaches>);
2. A CDC-recognized organization with national reach;

Vendor of Online National DPP Platform Role:

The vendor will offer an online platform and mobile app for data collection and patient engagement in the National DPP, customized, as needed, to meet the needs of this national project. Additionally, the vendor will provide:

- Initial and ongoing training and support in the platform and related tools to PCA/HCCN staff, Regional Lifestyle Coaches, and Local Health Center Liaisons.
- Ongoing customer support to participating patients related to use of the product.
- Ongoing updates to NACHC regarding the platform and app issues.

Technical Writer Role:

The vendor(s) will support the creation of:

- Training materials for PCA/HCCN or health center staff
- Patient education and training materials
- Program summaries or reports

Graphic Designer Role:

The vendor(s) will support the creation of:

- Training materials for PCA/HCCN or health center staff
- Patient education and training materials

- Graphics and design of summaries or reports
- Branding materials for the online platform and mobile app

Program Structure

NACHC's Diabetes Management and Prevention Program features a national model, with regional and local health center components. CDC's Prevent T2 curriculum will serve as the core curriculum that is delivered virtually to individuals in their home or community. Additional and enhanced features of NACHC's NDPP program include enhanced education and training of Lifestyle Coaches in topics of health equity, social support, and considerations for persons with diabetes as well as the provision of patient self-care tools (e.g., Patient Care Kits). The Patient Care Kits offer tools (e.g., glucose monitoring tests, blood pressure device, thermometer, pulse oximeter, and scale) to further support healthy behaviors and health outcomes that complement the goals set out by the NDPP.

Selection of vendors in response to this RFP will be made in August. Program start-up and training of PCA/HCCN and health center staff will take place from September – December 2021. Delivery of the NDPP curriculum, enhanced content, and deployment of Patient Care Kits will begin in January 2022. The final timeline will be adjusted, as needed, in order for NACHC to meet the CDC Diabetes Prevention Recognition Program's (DPRP) requirement of starting within six months of receiving preliminary recognition (anticipated as mid-July 2021).

Patient Eligibility

Program participants include individuals with diabetes and individuals at-risk for diabetes. Given the project's whole-person and patient-centered approach to diabetes management and prevention, individuals who meet the criteria of having diabetes or being at-risk for diabetes but who not have a family member who falls into one of these categories, will be encouraged to invite someone from their family or support network to participate alongside them in the program. Data will not be collected for family/support persons who do not have diabetes or who are not at-risk for diabetes. Specifically, the following are eligibility requirements for program participants:

1. Health center patients with diabetes (**Segment A**) who have a household or family member who is at-risk for diabetes (**Segment B**) AND is already a patient/willing to become a patient of the same health center.
2. Health center patients at-risk for diabetes (**Segment B**) who have a household or family member who has diabetes (**Segment A**) AND is already a patient/willing to become a patient of the same health center.
3. Health center patients at-risk for diabetes (**Segment B**) who have a household or family member who is also at-risk for diabetes (**Segment B**) AND is already a patient/willing to become a patient of the same health center.

Segment A – Individuals with diabetes

1. Participants must be 18 years of age or older
2. Participants must not be pregnant at time of enrollment. (Participants who become pregnant during the program may continue at the discretion of their health care provider.)

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

3. Participants must have a clinical diagnosis of Type 2 diabetes prior to enrollment.

Segment B – Individuals with pre-diabetes.

1. Participants must be 18 years of age or older
 - Participants must not be pregnant at time of enrollment. (Participants who become pregnant during the program may continue at the discretion of their health care provider.)
2. Participants must have a body mass index (BMI) of $\geq 25 \text{ kg/m}^2$ (OR $\geq 23 \text{ kg/m}^2$, if Asian American).
3. Participants in Segment B must meet one of these specifications:
 - Fasting glucose of 100 to 125 mg/dl
 - Plasma glucose of 140 to 199 mg/dl 2 hours after a 75 gm glucose load
 - A1c of 5.7 to 6.4
 - Clinically diagnosed gestational diabetes mellitus (GDM) during a previous pregnancy (may be self-reported)
 - OR a positive screening for prediabetes based on the CDC Prediabetes Risk Assessment (available online at <https://www.cdc.gov/diabetes/prevention/pdf/Prediabetes-Risk-Test-Final.pdf>) or the American Diabetes Association Type 2 Diabetes Risk Test (<https://www.diabetes.org/risk-test>)
4. Participants in **Segment B** cannot have a previous or current diagnosis of diabetes prior to enrollment. However, *for all individuals who meet the eligibility requirements for Segment B, it is recommended diabetes is first ruled out. If the participant is then diagnosed with diabetes, they will be placed in Segment A.*
5. *Those in Segment B who develop diabetes while in the program, should be referred to their primary care provider for appropriate clinical care and management, including diabetes self-management education and support programs and other resources such as nutrition therapy as appropriate. They will be then be considered part of Segment A. They can continue in the program with provider approval; their data will no longer be entered for DPRP Recognition.*

Selection of Lifestyle Coaches:

The Lifestyle Coach plays a key role in the progress of participants in the NDPP. Coaches work with participants to help them make lifestyle changes within the context of each participant's lived experience. Lifestyle Coaches may be, but are not required to be, licensed health care professionals. Many Lifestyle Coaches are Community Health Workers, Peer Counselors or *promotoras*, among others. NACHC will provide guidance to the PCAs/HCCNs and health centers regarding selection of Lifestyle Coaches. Key attributes that are foundational to being a Lifestyle Coach, included but are not limited to:

- Good people skills
- Empathy with the challenges and experiences of participants
- Fair, open-minded and practices unconditional positive regard – the complete acceptance and support of participants and meeting them where they are in their journey
- Excellent communication and listening skills; pays attention to body language as well as verbal language
- Ability to motivate and inspire confidence in participants
- Problem-solver
- Positive attitude and being able to recognize participants' strengths
- Compassionate and caring

- Flexible
- Supportive, encouraging and empowering
- Good facilitator as opposed to teacher/lecturer
- Energetic, engaged and dedicated to the program and the participants

Time Period

Time period for services is September 1, 2021 through June 30, 2022. Vendor(s) may be retained for a multi-year period of service, based upon successful performance during the period of initial service (contract year ending June 30, 2022) and on-going availability of funds.

Timeline:

- July 2021:
 - July 8, 2021: RFP released.
 - PCAs/HCCNs reach out to potential participant health centers to gauge interest in participation.
- August 2021:
 - August 15, 2021. Applications submitted online to NACHC by 11:59 pm.
 - Vendors notified of selection decision by August 20th.
 - NACHC works with selected contractors to prepare for launch.
- September/October 2021:
 - Selected staff from PCA/HCCN Hubs and health centers complete fundamental CDC Lifestyle Coach Training.
 - National Program Lifestyle Coach provides additional program content and training for selected PCAs & HCCNs and Local FQHC Liaisons.
 - NDPP platform vendor finalizes preparation of the mobile app and platform.
 - PCA/HCCN and Health Center Lifestyle Coaches engage in training around the enhanced curriculum, health equity, and program communication and data collection/sharing workflows.
 - Health Center Lifestyle Coaches identify eligible patients and begin marketing the program.
- November 2021:
 - PCA/HCCN and Health Center Lifestyle Coaches finalize program communication and data collection/sharing workflows with NACHC.
 - Health Center Lifestyle Coaches begin enrolling patients, distributing scales, and providing training around use of technology to gain access to the program as well as conducting any visits to confirm eligibility.
 - Health Center Lifestyle Coaches work with patient care teams to develop workflows.
- December 2021:
 - Health Center Lifestyle Coaches continue enrollment of patients, distribute devices, and provide training around use of technology to gain access to the program.
 - Health Center Lifestyle Coaches, with support from PCA/HCCN Lifestyle Coaches, will hold informational sessions for patients who have agreed to participate.
 - PCA/HCCN and Health Center Lifestyle Coaches finalize workflows.
- January to June 2022:
 - Lifestyle Coaches conduct NDPP sessions with program participants, incorporating patient self-care tools, as appropriate. Collect data.

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

- Lifestyle Coaches support participants in gathering/submitting data needed for CDC DPRP reporting and internal evaluation.
- Health Center Lifestyle Coaches develop and share resources around local supports and services available to participating patients.
- Health Center Lifestyle Coaches will connect patients to appropriate support services, coordinate on an ongoing basis with patient care teams around issues that arise during sessions, and build the capacity of the health center to conduct virtual, at-home visits for participating patients.
- PCA/HCCN and Health Center Lifestyle Coaches engage in program meetings and ongoing training, as needed.

Funding & Budget Information

Funding: Health Resources Service Administration (HRSA)

See budget allotments for each vendor sought below. Multiple vendors may be selected depending on scope of skills/expertise.

- PCA/HCCN: Up to \$10,000 per organization; maximum of three (3)
- Health Centers: Up to \$8,000 per organization; maximum of six (6)
- National Program Lifestyle Coach: Up to \$45,000
- Lifestyle Coach Training Program Vendor: Up to \$15,000
- Online National DPP Platform: Up to \$8,000.
- Technical Writer: Up to \$6,000
- Graphic Designer: Up to \$6,000

Joint Applications/Proposals

Joint applications/proposals by a team of unique and independent consultants/organizations are permitted. If submitting a joint submission, please denote individual costs in the budget template.

Scope of Work and Deliverables

PCA/HCCN Deliverables

Selected PCAs/HCCNs will support implementation of NACHC's Diabetes Prevention and Management Program by:

- Identifying and recruiting 2-4 health centers to participate in the program. Eligible health centers (FQHCs and look-alikes) include those who:
 - a. Senior leadership identifies two (2) staff members willing to complete training to become a CDC Lifestyle Coach (or already trained as a Lifestyle Coach). Additionally, these staff members must be willing to complete additional training around NACHC's Diabetes Prevention and Management Program, program logistics, and the mobile app/platform.
 - b. Are willing and able to identify and recruit up to 12 eligible patients to participate in the virtual curriculum (at least half of whom meet CDC's 'at-risk' eligibility criteria; remaining patients are individuals with diabetes).

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

- Identifying a qualified individual who will receive all appropriate training including, but not limited to, foundational CDC Lifestyle Coach, NACHC's Diabetes Prevention and Management Program, and program logistics.

Selected PCAs/HCCNs will facilitate and deliver the enhanced curriculum to program participants by agreeing to:

- Recruit and engage 2-4 member health centers to participate in the program.
- Collaborate with the National Program Lifestyle Coach and Health Center Coaches to deliver the CDC-approved curriculum to eligible health center patients.
- Collect and submit ongoing participant progress data.
- Design workflows to support sharing of participant data with patient's care team and in the health center's electronic health record (EHR).
- Receive ongoing training and support in NACHC's program curriculum and participate in scheduled check-ins with NACHC.
- Meet with NACHC Program team and National Lifestyle Coach periodically to discuss program updates and troubleshoot issues.

National Program Lifestyle Coach Deliverables:

- Trained and experienced NDPP Lifestyle Coach to oversee delivery of the CDC Prevent T2 curriculum and NACHC's national program content.
- Design and implement a training program for PCA/HCCN and health center staff around NACHC's program curriculum, program logistics, and health equity.
- Provide ongoing training, quality assurance of facilitation skills and coaching, and data integrity, collection, and submission.
- Regularly meet with NACHC to discuss project status and training needs.

Vendor of Lifestyle Coach Training Program

NACHC is seeking vendors that are able to provide foundational lifestyle coaching per CDC DPRP standards and meeting one of the following criteria:

1. A training entity that has an MOU with CDC and is listed on the CDC website (found here: <https://nationaldppCustomer Service Center.cdc.gov/s/article/Training-for-your-LifestyleCoaches>);
2. A private organization with a national network of program sites;
3. A CDC-recognized virtual organization with national reach;
4. A Master Trainer who has completed at least 12 hours of formal training as a Lifestyle Coach, successfully offered the National DPP lifestyle change program for at least one year, and completed a Master Trainer program offered by a training entity listed on the CDC website.

The selected vendor will provide the training through a virtual modality for up to twenty-one (21) lifestyle coaches and other staff involved in NACHC's Diabetes Management and Prevention Program between September and October 2021.

Vendor of Online National DPP Platform:

NACHC is seeking vendors that have experience with:

- Building and maintaining a data collection, tracking, and reporting platform for the National DPP.

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

- Providing users of the system training and technical support including lifestyle coaches, data managers, project coordinators, and patients.

Technical Writer:

NACHC is looking for a technical writer who has:

- Demonstrated writing/editing experience
- Experience interviewing health care providers or other similar outreach/communication efforts to targeted groups
- Strong writing and communication skills

The vendor will create or edit documents or summaries including, but not limited to:

- Training materials for PCA/HCCN or health center staff
- Patient education and training materials
- Program summaries or reports

Graphic Designer:

NACHC is looking for a graphic designer who has:

- Knowledge and expertise in design principles and concepts
- Experience in visual design
- Ability to quickly adapt and produce requested products and deliverables
- Experience with curriculum planning and design

The vendor will create branding materials to be used across:

- Training materials for PCA/HCCN or health center staff
- Patient education and training materials
- Program summaries or reports
- The online platform and mobile app

Information Requested

Proposals must be submitted using NACHC's web-based portal by **August 15 2021**. The system will notify you upon your successful submission into the portal. Incomplete proposals will not be considered. NACHC will notify all applicants on or around **Friday, August 20, 2021**.

Online Submission Portal: https://nachc.co1.qualtrics.com/jfe/form/SV_bkJmzxQo3aaprds

Proposals must contain the below items, which are evaluated based on the specific criteria outlined in the Evaluation table below.

- **Point of Contact Information**
- **Name / Description of Organization**
- **Capability Statement**
- **Education and Experience**
- **Quality of Work Samples**
- **List of Potential Participant Health Centers (For PCAs/HCCNs Only)**

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes

- **Daily and Hourly Rates**
- **Signed Statement** (see below)

ATTESTATION

By my signature below, I hereby certify that this Proposal reflects my best estimate of the capability of organization and the true and necessary costs for the project, and the information provided herein is accurate, complete and current as of the date of my signature below.

I agree that my electronic signature is the legal equivalent of my manual signature on this application. By typing my name below, I certify that the information provided in the application is true and accurate.

Print Name:

Title:

Organization:

Signature:

Date:

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.

Evaluation Criteria

Complete proposals will be evaluated using the criteria below.

Rating Factor	Application Selection Criteria To earn full points in each domain, the applicant must demonstrate:	Points
Capability Statement*	<p>Capability statement that demonstrates ability to deliver technical skills and/or subject matter expertise on the topic. Please ensure that statement addresses your ability to work with others and collaborate.</p> <p>Page Limit for Capability Statement: 2 pages</p>	15
Experience & Education*	<p>Resume(s)/CV(s) of expert(s) / staff clearly show tenure, professional experience, and/or education that reflects knowledge and ability in content expertise. Submitted documents should reflect expertise in all areas in which that applicant has proposed qualification for.</p> <p>Page Limit for Resume(s) / CV(s): 2 pages per key expert / staff</p>	30
Quality of Work Samples	<p>Work samples must demonstrate professional experience, and/or education that reflects knowledge and ability in content area to which proposal submitted.</p> <p>Applicants must submit:</p> <ul style="list-style-type: none"> • A brief statement summarizing work samples and experience. (1-2 pages) • 2-3 work samples (e.g.: presentation(s), supplementary training product(s), publications developed, etc.) delivered by vendor that demonstrate understanding of the specific SME area, as described in this RFP. • Past client evaluations, reference letters, and/or testimonials demonstrating quantitative and/or qualitative feedback from at least two audiences, clients, or engagements occurring within a year of RFP application date. (1-2 pages) 	40
List of Potential Participant Health Centers (For PCAs/HCCNs Only)	<p>PCAs/HCCNs must provide a list of at least 2 potential participant health centers and include the following for each health centers.</p> <ul style="list-style-type: none"> • Name and address of potential participant health centers. • Statement of support from the CEO and CMO of potential participant health centers. 	n/a
Daily/Hourly Rates and Budget Narrative	<p>Daily and Hourly Rates for all expert(s) and staff that may be engaged in work are reasonable. Rates should reflect overall cost rate inclusive of any fringe, overhead and/or general & administrative expense (G&A), if required.</p> <ul style="list-style-type: none"> • “Reasonableness” is assessed based on market or industry standards and in consideration of the not-for-profit status of health centers and NACHC. 	15
Total		100

Implementation of NACHC's Diabetes Prevention and Management Program: A National, Virtual Model for Delivering the National Diabetes Prevention Program to Individuals Living with/at-Risk for Diabetes