



Request for Proposals (RFP)

Supporting Value-Based Care and Maternal Health Project

Project Period: September - December 2025

Submission Deadline: September 2, 2025

Submission Portal: https://survey.nachc.com/jfe/form/SV_80bFCaPibWe2hF4

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Request for Proposals: Supporting Value-Based Care and Maternal Health Project



Proposals Due: September 2, 2025, 12 pm ET

Project Period: September 22 - December 22, 2025; with continued opportunities pending funding availability

Budget: Multiple awards anticipated; estimated range from \$5,000 - \$50,000/award

For more information, contact: Tobi Dare @ tdare@nachc.org

ORGANIZATION OVERVIEW

The mission of the National Association of Community Health Centers (NACHC) is to champion Community Health Centers delivering affordable, effective, comprehensive primary care that is community-driven and improves health for all.

NACHC:

NACHC is the leading innovative change agent collaborating with affiliates and partners to advance Community Health Centers as the foundation of a health care system built on accessible, patient-governed, high-quality, integrated primary care.

- 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, leadership development, and technical assistance to support and strengthen health center operations and governance.
- Develops alliances and partnerships with the public and private sectors to build stronger and healthier communities.
- NACHC works closely with chartered State and Regional Primary Care Associations (PCAs) to fulfill their shared health care mission and support the growth and development of community-based health center programs.
- Our support to Community Health Centers is organized around the SEPP (science, education, policy, and practice) framework.

BACKGROUND

The National Association of Community Health Centers, Inc. (NACHC) seeks vendors to support training, learning, and program activities to advance value-based care and maternal health in community health centers.

RFP SERVICES DESIRED

Through this Request for Proposals (RFP), NACHC seeks several vendors to collaborate with the NACHC team in providing technical expertise to:

1. Support health centers in the adoption of value-based payment and delivery models, including the design and delivery of tailored educational programs to support health center's transition to value-based care.
2. Improve maternal health through implementation of an innovative, patient-driven virtual care model, *Leading Change*, targeting improved blood pressure control during pregnancy.

TIME PERIOD

The initial time period for services is September 22 through December 22, 2025, with opportunities for additional work in 2026-2028.

FUNDING & BUDGET INFORMATION

- Multiple awards anticipated.
- Value-Based Care awards estimated to range from \$5,000 - \$15,000 per contractor.
- Maternal Health awards estimated at \$50,000 per HCCN and \$10,000 per health center (as a pass-through from the HCCN) with continued funding anticipated in years two and three for a total of up to \$100,000 per HCCN and \$30,000 per health center. See additional funding details under *Scope of Work & Deliverables*.

SCOPE OF WORK & DELIVERABLES

NACHC seeks vendor(s) with a variety of subject matter expertise. Interested vendors should select at least one area of interest from the list below. Vendors can apply to more than one area in a single application; each area will be reviewed and evaluated independently.

VALUE-BASED CARE:

- **Payment & Total Cost of Care.** Provide subject-matter-expertise in value-based payment and total cost of care and support for the writing of an evidence-based action guide on total cost of care in the context of value-based care including financial models and revenue projections.
- **Value-Based Care Content.** Develop content, presentation(s), tools, or resources that educate health centers on value-based care and value-based payment models, including such concepts as the Health Care Payment Learning and Action Network (HCPLAN) Alternative Payment Model Framework, and Centers for Medicare and Medicaid (CMS) models and programs.
- **Care Transformation & Learning Community Support.** Support implementation of a health center learning community to improve value-based care literacy and drive health center transformation. Work with the NACHC team to develop care transformation content, presentation(s), tools, and/or resources.
- **FQHC Billing and Coding.** Develop content and resources that support health center advancement in value-based payment, including understanding of available FQHC billing, EMR tools for enhanced billing, PPS calculations, wrap payments, reconciliation, and related reimbursement processes.
- **Workforce in Support of Non-Medical Clinical Drivers of Health.** Provide subject-matter-expertise as related to leveraging the health center workforce, including expanded care team models, in support of non-medical clinical drivers of health (i.e., social drivers of health), and closed-loop referral systems. To include support for the writing of an evidence-based action guide on these topics.
- **Health Information Technology.** Provide subject-matter-expertise on the use of health information technology (HIT) in support of health center advancement in value-based care. To include support for

the writing of an evidence-based action guide on applications of HIT in value-based care including AI tools.

- **Measure Alignment.** Support development of a policy and advocacy strategy for measure alignment, including attention to data for value-based care risk models, reimbursement, coalition building, policy recommendations, and the published evidence and research. Identify barriers to measure reporting across payers, key stakeholders, and opportunities for alignment. Work with the NACHC team to design strategies to engage health centers in a process of providing input into the strategy.
 - **Technical Writer.** Support the development and writing of health center case studies, evidence-based action guides, and other strategic resources that advance value-based care initiatives. Responsibilities include conducting interviews with key health center leaders to gather qualitative insights for case study development. Collaborate with subject matter experts, as needed, in development of documents. Tailor written materials to diverse audiences.
 - **Graphic Design.** Support the design and formatting of key project documents, including Action Guides, resources, and case studies.
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Value-Based Care Funding Breakdown:

- Range: \$5,000 - \$15,000 per contractor
- Funding level: Depends on scope of work proposed

MATERNAL HEALTH:

Support will be provided to two HCCNs, each partnering with 10 health centers to implement an adapted version of NACHC's [Leading Change](#) model, focused on:

- Screening for and addressing hypertension in pregnancy
- Reducing disparities in maternal health outcomes

Key Activities & Expectations:

- Patient Identification & Intervention:
 - Identify pregnant patients with hypertension
 - Implement evidence-based interventions, such as:
 - Aspirin prophylaxis
 - Self-measured blood pressure (SMBP)
 - Other proven clinical practices
 - Learning Community Participation:
 - HCCNs and participating health centers must be registered for NACHC's national [Elevate](#) learning forum, and actively engage in project learning community
 - Support Provided by HCCNs:
 - Health IT-specific training and technical assistance
 - Quality improvement (QI) and implementation support
 - Collection and reporting of hypertension-related performance measures
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Maternal Health Funding Breakdown:

For HCCNs:

- Initial funding: Up to \$50,000 (Year 1)
- Renewal: \$25,000/year for two additional years (Years 2 and 3), pending funding availability
- Total possible HCCN funding: \$100,000

For Participating Health Centers (as a pass-through from HCCN):

- \$10,000 per health center (Year 1)
- Renewal: \$10,000/year for two additional years (Years 2 and 3), pending funding availability
- Total possible per health center: \$30,000

Maximum Potential Funding per HCCN (Including Health Centers):

- HCCN Direct Funding: \$100,000
- Health Center Pass-Through Funds: \$300,000 (assuming ten participating health centers)
- Total possible per HCCN: \$400,000 over 3 years

INFORMATION REQUESTED

Proposals must be submitted to NACHC’s [online submission portal](#) by September 2, 2025, 12:00 pm ET. The portal will confirm successful submission. Incomplete or late proposals will not be considered.

Online Submission Portal:

Proposals must contain the following items, which are evaluated based on the specific criteria outlined in the table below: Capability Statement; Qualifications & Experience; Work Samples; and Daily/Hourly Rates.

Rating Factor	Application Selection Criteria:	Points
Capability Statement	Capability statement that demonstrates ability to deliver proposed deliverable, technical skills, and/or subject matter expertise. Word limit for Capability Statement: 500-word limit.	30
Qualifications & Experience	Resume(s)/CV(s) of all key expert(s)/staff clearly showing tenure, professional experience, and/or education that reflects knowledge and ability in content expertise.	30
Work Samples	Examples of previous work that demonstrate proficiency in proposed content area and/or proposed deliverable.	20
Daily/Hourly Rates	Daily or 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. “Reasonableness” is assessed based on market or industry standards and in consideration of the not-for-profit status of health centers and NACHC.	20
Total		100