The Center for Prevention at Blue Cross and Blue Shield of Minnesota (Blue Cross) delivers on Blue Cross' long-term commitment to make healthy choices possible for all Minnesotans. By tackling the leading causes of preventable disease—commercial tobacco use, physical inactivity and unhealthy eating—we advance health equity to transform communities and create a healthier state.

Funded through proceeds from Blue Cross' historic lawsuit against the tobacco industry, we aim to make a healthy difference in people's lives: creating health equity by supporting Minnesota communities to achieve their full health potential.

To achieve this, the Center for Prevention invests in community funding programs, public awareness campaigns, evaluations, and actively advocates for policies, systems and environmental changes to advance community health and health equity across the state.

Visit <u>www.CenterforPreventionMN.com</u> for more information.

INVITATION TO PROVIDE INFORMATION

Blue Cross is excited to ask for proposals for our three-year Health POWER (People Organizing and Working for Equitable Results) funding initiative. We are seeking to support projects that enhance the capacity of local communities to create policy, systems, and environmental (PSE) change that will lead to long-term, sustained health improvement. In the first year, we will fund projects with budgets that range from \$75,000 to \$150,000. Projects that continue into years two and three will see budgets in a range of \$60,000 - \$110,000 and \$50,000 - \$85,000, respectively.

PROJECT OVERVIEW

Blue Cross will fund projects that support community-driven changes to policy (rules or laws), systems (process of how things are done) or environments (what one's setting looks and feels like) that will lead to healthier, more equitable communities for all. (These types of changes are also referred to as "PSE" change in this document.) PSE change includes:

→ Policies adopted by organizations that apply to their property or operations, sometimes called organizational rules. A policy may also be a public policy adopted by units of government (cities, counties or tribal nations) that impact the entire community and take the form of an ordinance, law, resolution, regulation, etc. Policy change often has a significant and lasting influence on systems and environments.

→ System change interventions may impact many elements of the operations and environments within an organization or institution. Systems change involves changing the established rules within organizations and institutions to promote positive health outcomes where we live, work and play.

→ Environmental changes take place within the lived-environment and can occur independently of a system or policy change, through other actions that change an economic, social or physical situation.

Blue Cross wants to support a variety of projects across Minnesota that reflect diverse strategies to engage community members in improving community health and addressing health inequities. Organizations should propose ideas that address PSE change related to physical activity, healthy eating, or reducing commercial tobacco* use. (**Tobacco in this document refers specifically to the use of manufactured, commercial tobacco products, and not to the sacred, medicinal and traditional use of tobacco by American Indians and other groups.*) Based on community need, ideas that address more than one of these areas are also welcome.

We believe that communities most impacted by health disparities are the best equipped to lead work that will help overcome the systemic barriers they face. The Health POWER funding initiative is designed to strengthen leadership development, invest in community-led solutions, and create collaborations to

advance local PSE change. Funding is available for projects that align with the Center for Prevention's strategic goal to build community capacity and our approach to invest, connect, advocate, and promote.

Approach:

- **INVEST**: Develop sustainable models for advancing community leadership and systems partnerships. (Building community investment)
- CONNECT: Strengthen leadership networks and connections
- ADVOCATE: Cultivate leaders and coalitions to advance PSE change
- **PROMOTE**: Promote (community leadership, causes and initiatives) to increase community/statewide engagement and investment

For more information on our approach visit: <u>www.centerforpreventionmn.com</u>

During this three-year initiative, Blue Cross will bring staff together from the funded projects to network, share successes and challenges, and identify opportunities to collaborate with peers in their community work. In this cohort model, organizations participating in this initiative will assign their Lead Project Coordinator and one other staff person or organization leader involved in the project to participate in these gatherings. The time commitment will be approximately 25-30 hours/person/year. Participants in this cohort will have responsibility to each other as they align their projects and community work with shared goals determined by the group. We want to partner with organizations, communities and stakeholders to advance a shared vision for healthy communities in Minnesota.

Successful project proposals will:

- Support community driven solutions to reduce health inequities.
- Include a goal related to policy, systems, or environmental (PSE) change.
- Address at least one of the Center for Prevention's issue areas of Physical Activity, Healthy Eating, Commercial Tobacco Use all with a goal of advancing health equity. Projects may address more than one of these issue areas and take a holistic approach to health.
- Demonstrate that the project design is informed by community members knowledge and experience.
- Demonstrate that the project is implemented in partnership with the community or includes constituent engagement.
- Support community leadership development.
- Use community engagement to advance health equity.
- Commit a staff member to regularly collaborate with other funded participants on achieving health equity goals.

We know projects will be developed for specific communities. For background, here are some project examples:

- Support change at a community level to make it possible for people to have what they need in their communities to be active and well.
- Engage community members to create and pass culturally specific food policies to eliminate barriers to healthy eating.
- Develop and deliver culturally specific messages that fulfill unmet education needs around a variety of tobacco issues and for a variety of audiences messages that distinguish commercial tobacco from sacred tobacco.
- Support communities that would like to address two or more health concerns within a given setting, such as physical inactivity, commerical tobacco use or lack of access to healthy and culturally appropriate foods.

- Engage community members in developing strategies to address the intergenerational transmission of Adverse Childhood Experiences and related health impacts, such as commerical tobacco use and obesity.
- Support environmental changes that reflect the values of the people who live there, and increase opportunities for community members to be physically active.
- Support youth engagement and leadership development on issues related to community health and PSE change.
- Develop targeted educational and communication campaigns that reach a specific audience.
- Support new and emerging leaders (especially people of color and Indigenous people) in food system PSE work.

We are interested in supporting work that connects to our strategic goals, but also work that will be sustainable beyond our funding. You can view our strategic plan in the attachments to check for goal alignment.

Blue Cross will give preference to applications that are designed to increase opportunities for community members who typically face barriers to healthy community initiatives or participation.

Blue Cross wants to select projects that reflect representation from the seven-county metropolitan area, Tribal communities and greater Minnesota.

FUNDING PERIOD AND PROCESS

The maximum period of funding for a selected applicant is up to three years (November 1, 2019 – October 31, 2022). Applicants selected for funding are for **one year** and are renewable, based on contract compliance and annual satisfactory progress.

There is a two-part application process:

STEP 1: All applicants will first need to submit a proposal following the requirements in this RFP. **STEP 2**: Based on an internal review of the submitted proposals, selected applicants will be invited to submit additional information that may include, but not be limited to, more detail on their proposed work, budget for the proposed work and staffing to deliver the services. Blue Cross will conduct site visits of applicant finalists before making final funding decisions and negotiating contracts with successful applicants. All contracts are subject to successful contract negotiations between the applicant and Blue Cross.

An informational webinar will be held on **Monday, May 13th, 2019, at 11:00am Central Time**. This informational webinar will offer more details about the Health POWER Funding Initiative and provide an opportunity to ask questions. Applicants are encouraged to participate. Blue Cross will also make a version of the webinar available on the Center for Prevention's website. To access the webinar visit: <u>https://bluecrossmn.zoom.us/j/221032592</u>

Applications must be submitted via the Blue Cross' online application system at <u>https://bcbsmn.smartsimple.com</u> no later than **Friday, June 7th, 2019 at 1:00pm Central Time**. Partial submissions will not be accepted. You must complete the full online application to be considered for funding. For more information on eligibility or how to submit your application, visit <u>www.centerforpreventionmn.com/our-approach/available-funding</u>

Applicant Information

Be prepared to answer the following questions when first making your online profile in our funding portal. We recommend completing your application in a word processing document and copy the content into the application portal later.

Contact Information

Contact Information for this Proposal

Primary Contact Name	
Title	
Primary Contact Phone Number	
Primary Contact Email Address	

General Information

- 1. Are you using a Fiscal Sponsor for this project? Yes/No
- 2. Project Title
- 3. Project start date
- 4. Project end date
- 5. What is the total dollar amount for this request?
- I would like to receive information about upcoming webinars related to this request for proposals. Yes/No
- 7. Provide a brief summary of your organization's mission and goals. How does this project support your organizational mission and goals? (500 words)
- 8. Provide a brief description of your organization's current programs or activities. (500 words)
- 9. Enter your organization's annual budget for the last fiscal year.
- 10. Has your organization been funded by the Center for Prevention in the past, either directly or through a subcontract? Yes/No/Unsure

Race/Ethnicity	Estimated Percentage Estimated percentage includes total of all subgroups including "Other"
Asian American	
If applicable, please specify subgroup:	
Hmong, Asian Indian, Chinese, Vietnamese, Korean, Filipino, Laotian	
Black/African American	
If applicable, please specify subgroup:	
Somali, Ethiopian, Liberian, Kenyan, Nigerian	
Hispanic/Latino/Latinx	
If applicable, please specify subgroup:	
Mexican, Puerto Rican, Ecuadorian, Salvadoran, Guatemalan, Colombian	
Native American/American Indian/Alaska Native/Native Hawaiian	
If applicable, please specify subgroup:	
Native Hawaiian, Guamanian or Chamorro, Samoa, Tongan, Fijian	
Middle Eastern or North African	
If applicable, please specify subgroup:	
Lebanese, Iranian, Syrian, Egyptian, Algerian, Moroccan, Afghan	
White	

12. Provide the ethnic/racial demographics of your **executive director (or equivalent) and senior-level management** by providing the percentage in each category below ("Senior level management" is defined as those with responsibility for staff and budget at the organization-wide level):

Race/Ethnicity	Estimated Percentage Estimated percentage includes total of all subgroups including "Other"
Asian American	
If applicable, please specify subgroup:	
Hmong, Asian Indian, Chinese, Vietnamese, Korean, Filipino, Laotian	
Black/African American	
If applicable, please specify subgroup:	
Somali, Ethiopian, Liberian, Kenyan, Nigerian	
Hispanic/Latino/Latinx	
If applicable, please specify subgroup:	
Mexican, Puerto Rican, Ecuadorian, Salvadoran, Guatemalan, Colombian	
Native American/American Indian/Alaska Native/Native Hawaiian	
If applicable, please specify subgroup:	
Native Hawaiian, Guamanian or Chamorro, Samoa, Tongan, Fijian	
Middle Eastern or North African	
If applicable, please specify subgroup:	
Lebanese, Iranian, Syrian, Egyptian, Algerian, Moroccan, Afghan	
White	
Other	

Race/Ethnicities		
Race/Ethnicity	Estimated Percentage Estimated percentage includes total of all subgroups including "Other"	
Asian American		
If applicable, please specify subgroup:		
Hmong, Asian Indian, Chinese, Vietnamese, Korean, Filipino, Laotian		
Black/African American		
If applicable, please specify subgroup:		
Somali, Ethiopian, Liberian, Kenyan, Nigerian		
Hispanic/Latino/Latinx		
If applicable, please specify subgroup:		
Mexican, Puerto Rican, Ecuadorian, Salvadoran, Guatemalan, Colombian		
Native American/American Indian/Alaska Native/Native Hawaiian		
If applicable, please specify subgroup:		
Native Hawaiian, Guamanian or Chamorro, Samoa, Tongan, Fijian		
Middle Eastern or North African		
If applicable, please specify subgroup:		
Lebanese, Iranian, Syrian, Egyptian, Algerian, Moroccan, Afghan		
White		
Other		

14. Please estimate what percentage of the population served by this project identifies as the following Genders/Sexual Orientations:	
Gender/Sexual Orientation	Estimated Percentage
Lesbian, Gay, Bisexual and/or Queer	
Trans	
Gender Identity differs from that assigned at birth	

15. Please estimate what percentage of the population served by this project identifies as the following Age Groups		
Age	Estimated Percentage	
Early childhood (0-4 years old)		
K-12 (5-17 years old)		
Young adults (18-24 years old)		
Adult (25-64 years old)		
Older adults (65+ years old)		

16. Please estimate what percentage of the population served by this project identifies as the following:	
Status	Estimated Percentage
Immigrant and/or Refugee	
Having a mobility and/or physical disability	
Having a mental health disability	
Having a substance use disorder	
Low-income	
Lacking sufficient health care insurance	

17. (Optional) Please list any additional communities of focus for your project that are not included above. (Word limit 50)

Geographic Areas

18. Please name which geographic areas are served by your project.		
Geography	Geographic Region Name	
Statewide - defined as any project extending throughout the state of Minnesota without further defining a specific geography. Yes/no		
County(ies) (if area served is a Tribal Community or Reservation, please also select County/ies where Tribal Community or Reservation is located.)		
City/ies, if applicable		
Neighborhood, if applicable		
Other, if applicable		
Tribal Communities or Reservations	Choose from Bois Forte, Fond du Lac, Grand Portage, Leech Lake, Lower Sioux, Mille Lacs, Prairie Island, Red Lake, Shakopee Mdewakanton, Upper Sioux, White Earth	

19. Are you a Minnesota Tribal Nation? Yes/No

RFP Questions

- 20. Does your organization have a Formal Equity/Inclusion policy or statement? If so, please attach to your application.
- 21. What are your organizational goals around diversity, equity and inclusion? Please provide any major accomplishments or other examples of progress on these goals. (500 words)
- 22. Which of the following statements best match your organizational leadership commitment and work in equity and inclusion?
 - A. Our organization is not prioritizing equity at this time.

- B. Our organization demonstrates aspiration to become a champion for equity we have the organizational leadership interest but don't have the knowledge and/or expertise to champion equity.
- C. Our organization is developing an emerging focus on becoming a champion for equity and inclusion our organization has demonstrated strong interest and aspiration in equity. Our leadership has begun making space for challenging conversations and begun implementing institutional changes to yield more equitable and inclusive policy outcomes.
- D. Our organization has demonstrated itself as a leader/champion for equity and inclusion Over a sustained period of time, senior leaders at our organization have challenged the institution to champion equity and inclusion. Our organization has made significant internal and external changes that have resulted in more equitable, sustainable impacts for associates and communities we serve.
- 23. Provide a brief (1-2 paragraph) summary of the work you plan to do. (100 words)
- 24. Please include your project activities and timeline. (1000 words)
- 25. Please describe the population served by the project. (250 words)
- 26. Describe how the population above is reflected in and engaged in the leadership of your organization. (250 words)

PROJECT INFORMATION

Answer the following questions to the best of your ability. Some questions are scored, others are not.

- 27. How does your project align with the mission and vision of the Center for Prevention? Please refer to our website at https://www.centerforpreventionmn.com/who-we-are/. (500 words)
- 28. Which issue area(s) does your proposed project seek to address? (check all that apply) Commercial Tobacco, Healthy Eating, Physical Activity
- If your proposal cannot meet the requirements written in the Eligibility Criteria and you think your project should not have to meet these requirements, please include a short explanation. (150 words)
- 30. How does your project contribute to our approach to Invest, Connect, Advocate and Promote?
 Please list as many approaches that relate to your project. (See attachment 'Our Approaches')
 (500 words)
- 31. How will your project advance health equity? (500 words)
- Identify if the project will use a policy, systems, or environmental (PSE change) strategy or strategies. Which PSE changes will this project use to advance health in your community? (250 words)
- 33. Over the next three years, Blue Cross will bring together staff from the funded projects to network, share successes and challenges, and identify opportunities to strategize and work to advance a shared vision for healthy communities in Minnesota. Organizations participating in this initiative will assign their Lead Project Coordinator and one other staff person or organization leader involved in the project to participate in these gatherings. The individuals

that participate in the cohort should have experience working with diverse communities and collaborating with other organizations that work in community. The time commitment will be approximately 25-30 hours/person/year. Locations will be determined once funded projects are identified and remote participation will be considered. If your project is funded, do you agree to these commitments? Yes/No

QUESTIONS

Please email any questions to <u>chris.matter@bluecrossmn.com</u>. Questions and answers will be summarized and shared publicly at <u>www.centerforpreventionmn.com/our-approach/available-funding/</u>

AWARD NOTIFICATION

All applicants will receive an email by July 1, 2019, notifying them of the status of their proposals.

AWARD CRITERIA

This RFP is not an offer to enter into an agreement with any party, but rather a request to receive proposals from entities interested in providing the products or services outlined herein (each such entity referred to as a "**Supplier**"). Any responses to this RFP, also referred to as a proposal, may be deemed by Blue Cross to be an offer to enter into a definitive relationship with Blue Cross.

Blue Cross, in its sole and absolute discretion, reserves the right to (1) accept or reject any and/or all responses; (2) modify the requirements set forth in this RFP; (3) utilize alternative Suppliers to provide the same or similar products and services; or (4) enter into negotiations with any Supplier(s) for any and/or all of the products or services that are the subject of this RFP.

All organizations that meet eligibility criteria are encouraged to apply. Awards are contingent upon successful negotiation of award amount and funding agreement.

ELIGIBILITY CRITERIA

Funding will be provided to organizations that have a local and credible presence in the communities in which they propose to work and meet the following criteria:

→ Eligible lead Applicants must be one of the following:

- Nonprofit organization with 501(c)(3), 501(c)(4), or 501(c)(6) classification with the Internal Revenue Service;
- Federally Recognized Minnesota Tribal Nation;
- Unit of local government (for example, city, county or grouping of cities);
- Formal legal entity; or
- An organization with a fiscal sponsor that meets the requirements above

→ Non-eligible applicants and activities include:

- Partisan organizations/Political Action Committees; fundraising, capital, or political campaigns
- Initiatives based solely on promoting individual behavior change
- State or federal level lobbying
- Capital improvements
- Paying off debt
- Non-project related activities
- Replacing current funding sources
- Provision of alcohol, tobacco or other controlled substances
- Purchase of land

OTHER REQUIREMENTS

If you receive funding, you must comply with the following requirements, as applicable: Applicants who engage in lobbying activities must comply with all applicable federal, state, and local laws, rules, regulations, ordinances, and directives regarding registration and reporting for lobbying activities, as defined in Minnesota Statute Chapter 10A. Blue Cross is not a lobbyist principal for the purpose of any project. Blue Cross funding cannot be used to conduct state- or federal-level lobbying.

If your proposal cannot meet one of the requirements written in the Eligibility Criteria or Other Requirements section(s), or if you think your project should not have to meet these requirements, please include a short explanation (150 words or less) in the space provided on the online application form.

OVERVIEW OF BLUE CROSS AND BLUE SHIELD OF MINNESOTA

- Blue Cross is an independent licensee of the Blue Cross and Blue Shield Association. See www.bluecrossmn.com for more information.
- Blue Cross is a diversified health company dedicated to making a healthy difference in people's lives.
- Blue Cross serves a membership of more than 2.9 million members.

CONFIDENTIALITY

This RFP, and any information supplied by Blue Cross or any of its affiliates in connection with the preparation of a proposal, is confidential. It must not be disclosed, reproduced or used in any way by the applicant (Company or individual offering products or services for sale, herein referred to as "Supplier") except for the sole purpose of responding to this RFP. Likewise, all information Suppliers provide in proposals and during negotiations, if held, will be regarded as confidential. Blue Cross will not disclose your proposal to other bidders at any time without your express written authorization.

CODE OF ETHICS

Supplier shall not engage in any conduct that might be construed as improperly influencing the decision of Blue Cross with respect to this RFP. The exchange or offering of any money, gift item, personal service or unusual hospitality by Supplier is prohibited. This prohibition extends to the officers, directors, trustees, employees, agents or immediate family members of either party. Failure to comply with this direction may, at the sole discretion of Blue Cross, disqualify a Supplier from consideration.

MWDBE PROGRAM

Blue Cross supports Suppliers that meet the criteria of the Minority, Women, Disadvantaged Business Enterprise ("**MWDBE**") program as one component of its analysis of Supplier capabilities. This program requires that Suppliers acknowledge it is the policy of Blue Cross to encourage all entities with which it enters into relationships for goods and services to use qualified MWDBE suppliers to the fullest extent consistent with the efficient performance of such contracts.

COMMUNICATIONS REQUIREMENTS FOR FUNDED ORGANIZATIONS

As a condition of your agreement with us, you will be asked to adhere to some basic requirements when communicating about the project we are funding. These terms will be provided prior to contract negotiation, if applicable.

RESOURCES

This resource list provides links to data and examples of strategies and community interventions that strive to reduce health disparities. This list is not exhaustive, as work is ongoing in Minnesota and across the United States.

Commercial Tobacco

Commercial Tobacco Prevention and Control: <u>https://www.health.state.mn.us/communities/tobacco/index.html</u> National Networks: <u>https://www.cdc.gov/cancer/ncccp/related-programs/Networking2Save.htm</u> Reducing commercial tobacco use disparities: <u>www.truthinitiative.org/news/7-solutions-reducing-tobacco-use-disparities</u>

Healthy Eating

Minnesota Food Charter: <u>https://www.mnfoodcharter.com</u> Data: <u>http://www.hungersolutions.org/hunger-data/</u> FRAC Food Research and Action Center: <u>http://www.frac.org/research</u>

Health Equity

Health Equity: <u>www.bluecrossmn.com/healthequity</u> Acheiving Health Equity: <u>www.rwjf.org/en/library/features/achieving-health-equity.html</u> Building Helathy Communities: <u>https://www.calendow.org/building-healthy-communities/</u>

Physical Activity

Strategies and Resources: <u>www.cdc.gov/nccdphp/dnpao/state-local-programs/physicalactivity.html#generalresources</u>

Healthy Places by Design: www.healthyplacesbydesign.org/our-work/

Small Town and Rural Multimodal Networks:

www.fhwa.dot.gov/environment/bicycle_pedestrian/publications/small_towns/