

Addendum to RFA# 67-184

Regional Maternal Health Coalitions

Date: April 19, 2024

Addendum Number: 1

Addendum Changes:

This addendum is to provide answers to all questions per the RFA Potential Applicant letter.

Q1: What does “This Is Not A Public Bid Opening” mean?

A1: The public is not invited to be present for the bid opening.

Q2: Is a “region” one of the six PA DHS regions or a region defined by the applicant?

A2: Neither. Regions must contain areas of maternal health vulnerability. Please refer to Part One, Section A, Item number 7, Paragraph 1, of the RFA. The region, as defined by a specific geographic area, covered by the application, must include areas of maternal health vulnerability, according to one or more of the following sources: the U.S. Department of Transportation’s Areas of Persistent Poverty and Historically Disadvantaged Communities (<https://www.transportation.gov/RAISEgrants/raise-app-hdc>); the March of Dimes Maternity Care Desert database (<https://www.marchofdimes.org/peristats/data?top=23>); the CDC’s Minority Health Social Vulnerability Index (<https://onemap.cdc.gov/Portal/apps/MapSeries/index.html?appid=3384875c46d649ee9b452913fd64e3c4>); the U.S. Maternal Vulnerability Index (MVI) (<https://mvi.surgoventures.org/>); the PA Health Equity Analysis Tool (PA HEAT) (https://public.tableau.com/app/profile/shane.mofford/viz/PAHealthEquityAnalysisToolPAHEAT5_10_21/DualIndexDB); the PA Environmental Health Indicators Map (<https://www.health.pa.gov/topics/envirohealth/Pages/EHI.aspx>); or the HRSA Maternal and Infant Health Mapping Tool (<https://data.hrsa.gov/maps/mchb/>). Additional information about how to apply, relevant and specific restrictions, and stated preferences regarding applicants are noted and outlined in Section B. Applicants are encouraged to be innovative and creative in their approach.”

Q3: I am writing to ask about RFA 67-184 - Regional Maternal Health Coalitions. I understand from p. 6 that the regions must contain areas of

maternal health vulnerability, but is there a predetermined geographic area that the region must cover? Or a minimum geographic area, such as number of counties?

A3: No. Please refer to Part One, Section A, Item number 7, Paragraph 1, of the RFA. The region, as defined by a specific geographic area, covered by the application must include areas of maternal health vulnerability, according to one or more of the following sources: the U.S. Department of Transportation's Areas of Persistent Poverty and Historically Disadvantaged Communities (<https://www.transportation.gov/RAISEgrants/raise-app-hdc>); the March of Dimes Maternity Care Desert database (<https://www.marchofdimes.org/peristats/data?top=23>); the CDC's Minority Health Social Vulnerability Index (<https://onemap.cdc.gov/Portal/apps/MapSeries/index.html?appid=3384875c46d649ee9b452913fd64e3c4>); the U.S. Maternal Vulnerability Index (MVI) (<https://mvi.surgoventures.org/>); the PA Health Equity Analysis Tool (PA HEAT) (https://public.tableau.com/app/profile/shane.mofford/viz/PAHealthEquityAnalysisToolPAHEAT5_10_21/DualIndexDB); the PA Environmental Health Indicators Map (<https://www.health.pa.gov/topics/envirohealth/Pages/EHI.aspx>); or the HRSA Maternal and Infant Health Mapping Tool (<https://data.hrsa.gov/maps/mchb/>). Additional information about how to apply, relevant and specific restrictions, and stated preferences regarding applicants are noted and outlined in Section B. Applicants are encouraged to be innovative and creative in their approach."

Q4: [Potential Applicant] would like to pose the following question regarding pg. 13, Section c) (1) (a), Applications shall specify the region, as defined by geographic area - What happens in the event that two awarded applicants propose regions with overlapping geographic areas? i.e., if applications for two distinct regions both include the same county.

A4: Each application will be reviewed and scored individually, with the highest-ranking applications awarded. Regions are not required to encompass an entire county and may include a portion of a county. Additionally, Part One, Section B, Item Number 1, titled "General" of the RFA states the decision of the Department with regard to selection of applicants is final. The Department reserves the right, in its sole and complete discretion, to reject any and all applications received as a result of this request and to negotiate separately with competing applicants. No application will be dismissed solely due to the make-up of the region. Applicants

are encouraged to talk to organizations in the proposed region to identify participants and garner support for the project.

Q5: Application Procedures, 4. Deliverables c) (2) (a) p. 10 - What are DOH expectations regarding identification of funding for implementation strategies identified by the Coalition?

A5: PART ONE, Section 4 titled "Deliverables" - (a) Funding sources (immediate and long-term) and lead organization(s) for each strategy selected for implementation; and (b) SMARTIE objectives (Strategic, Measurable, Achievable, Realistic, Time-bound, Inclusive and Equitable) and a shared measurement system with performance measures to evaluate outcomes (MMRC Data to Action Step 4).

The Department's expectation regarding identification of funding for implementation strategies are: Awardees will conduct a regional asset and gap analysis to identify key partners and decisionmakers; current initiatives aimed at reducing maternal morbidity and mortality and improving maternal health; opportunities for improvement; organizational and community factors; and available resources (human and financial). Awarded applicant(s) shall develop a sustainability plan, which shall include, but not be limited to, the identification and procurement of alternate resources and the development and implementation of policies and procedures necessary to continue the services and deliverables in the Grant Agreement following the termination of the Grant Agreement. The Grantee shall submit for approval the sustainability plan within 180 calendar days of the Grant Agreement being enacted.

**Q6: Application Procedures, 5. Reporting Requirements p. 11
Will DOH provide reporting templates?**

A6: Yes. Templates will be provided.

**Q7: Application Instructions and Required Formats, 2. Application Format, d) Budget Detail and Budget Narrative p. 17
How should we budget cost-of-living increases over the three-year grant period?**

A7: Within Part One, Section C titled Application Instructions and Required Formats. Subsection d states: Applicants shall include a narrative which justifies the need to allocate funds for items in the spreadsheet of the itemized budget and demonstrates how they will maximize cost effectiveness of Grant expenditures. Applicants shall also explain how all costs are calculated, how they are relevant to the completion of the proposed project, and how they correspond to the information and figures provided in the Budget Detail Summary.

**Q8: Application Instructions and Required Formats, 3. Definitions,
a) Budget Definitions p. 17**

There is a budget line item for Patient Services. Please describe expectations regarding Patient Services for the Coalition.

A8: The RFA defines the Patient Services budget category as: This budget category shall reflect funding dedicated for patient services. As mentioned in the RFA narrative the overall goal of this funding is to promote the use of regional coalitions and community engagement to improve maternal health at the local level. Please refer to Part One, Section A, Item number 7, Paragraph 1, of the RFA. The region, as defined by a specific geographic area, covered by the application must include areas of maternal health vulnerability according to the previously mentioned resources. Patient services are any services (for example medical or financial) that benefit the patient, based upon the individual needs of the applicant's selected region.

Q9: Do we need to be a coalition? If so, is there a minimum number of partners to apply? Or can my company submit on its own?

A9: No. Within Part One Section A p. 7: Applications are welcomed from Pennsylvania organizations, prioritizing those of whom are community-based, with the capacity to serve as a backbone organization for a maternal health coalition in their region, and a demonstrated history of community engagement and collaboration with potential coalition member organizations. Additionally, within number 4, deliverables, p. a) Awarded applicant(s) shall plan, develop, coordinate, and implement a Maternal Health Coalition in their identified region.

Q10: Should Philadelphia applicants propose projects to implement PA MMRC Report recommendations. This report explicitly excludes Philadelphia cases and the recommendations may not (officially, do not) apply to Philadelphia agencies. Philadelphia has its own city-authored report and recommendations, I believe.

A10: Yes. The data in the 2024 Pennsylvania Maternal Mortality Review Annual Report is inclusive of all pregnancy-associated deaths in Pennsylvania (including Philadelphia). The report may be found by visiting <https://www.health.pa.gov/topics/healthy/Pages/Maternal-Mortality.aspx>.

Q11: Vulnerability data on Page 6: is it acceptable to use additional sources, or only the sources listed?

A11: Additional sources are acceptable. Per Part One, Section A. Information for Applicants, p.7 states: the region, as defined by a specific geographic area, covered by the application must include areas of maternal health vulnerability, according to one or more of the following sources: the U.S. Department of Transportation's Areas of Persistent Poverty and Historically Disadvantaged Communities(<https://www.transportation.gov/RAISEgrants/raise-app-hdc>); the March of Dimes Maternity Care Desert database (<https://www.marchofdimes.org/peristats/data?top=23>); the CDC's Minority Health Social Vulnerability Index(<https://onemap.cdc.gov/Portal/apps/MapSeries/index.html?appid=3384875c46d649ee9b452913fd64e3c4>); the U.S. Maternal Vulnerability Index (MVI) (<https://mvi.surgoventures.org/>); the PA Health Equity Analysis Tool (PA HEAT)(https://public.tableau.com/app/profile/shane.mofford/viz/PAHealthEquityAnalysisToolPAHEAT5_10_21/DualIndexDB); the PA Environmental Health Indicators Map(<https://www.health.pa.gov/topics/envirohealth/Pages/EHI.aspx>); or the HRSA Maternal and Infant Health Mapping Tool (<https://data.hrsa.gov/maps/mchb/>). Applicants are encouraged to be creative in their approach, but are not limited to these sources.

Q12: Are there minimum thresholds required for the vulnerability index?

A12: No. Minimum thresholds are not required for the vulnerability index.

Q13: Can you share additional details on the Plan-do-study-act expectation? (Part 1, section B, 4.b.2)

A13: Part One, section B, 4.b.2 states: Implement an evidence-based or practice-based community engagement framework, utilizing a PDSA (Plan-Do-Study-Act) (<https://www.ahrq.gov/health-literacy/improve/precautions/tool2b.html>) cycle, to more deeply understand the unique circumstances that influence maternal health in the identified region, particularly where there are disparities. Applicants are encouraged to visit the website to understand the PDSA framework more thoroughly.

*Except as clarified and amended by this Addendum, the terms, conditions, specifications, and instructions of the RFA and any previous addenda, remain as originally written.

