



Title X Family Planning Services Program - California Request for Proposals (RFP)

The federal Title X family planning program was established in 1970 with strong bi-partisan support to create a pathway to contraceptive and related services for low-income patients nationwide. Since then, Title X has become an essential component of our public health system and has been hailed as one of the most important public health successes of the 20th century. On April 15, 2021, the United States Department of Health and Human Services (HHS) published a Notice of Proposed Rulemaking (NPRM) in the Federal Register to rescind Trump rules for the Title X program and restore Title X's mandate to provide comprehensive family planning services for all. The NPRM also seeks to reinstate program regulations promulgated in 2000 that successfully governed the program for nearly two decades, with important updates to expand access and promote health equity and inclusion. A Final Rule is expected to be released this Fall.

In anticipation of the release of the Final Rule in the coming months, Essential Access Health (Essential Access) – the statewide Title X Grantee in California - is pleased to announce the availability of up to \$3 million in funding available for a 12-month period for non-profit family planning providers that do not currently participate in the Title X program. We are pleased to encourage all eligible entities (see Section D) – including city and county health departments, federally qualified health centers and community clinics, non-profit hospital and university systems, Urban Indian health centers, and family planning and women's health organizations – to respond to this Request for Proposals (RFP) to join California's Title X Provider Network.

Title X provides support for equitable, affordable, client-centered, high quality family planning and related health services, for all clients, with priority given to low-income individuals or those who might not otherwise have access to these health care services. Title X also funds programs that provide a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including pregnancy testing and counseling, assistance to achieve pregnancy, basic infertility services, STI services, preconception health services, and adolescent friendly health) onsite or via telehealth (telephonic or virtual).

Please note the following important information and due dates:

- The application and all other required materials must be completed and sent via email to Frances Bernabe, Director of Family Planning Programs, at fbernabe@essentialaccess.org by 5:00 pm on August 20, 2021
- Onsite visits will be conducted for all finalists between September 7 – 17, 2021
- Selected applicants will be required to send one administrative, one clinical, and one finance staff member to the New Agency Orientation (date TBD).
- For additional information please contact Frances Bernabe at 213.368.4417 or fbernabe@essentialaccess.org.

Thank you for your interest in the Title X program. We look forward to reviewing your application.
Sincerely,

A handwritten signature in blue ink that reads 'Julie Rabinovitz'.

Julie Rabinovitz, MPH
President + CEO



2021 Title X Family Planning Services for Select Counties Grant Guidelines and Instructions

A. Introduction

Essential Access Health (Essential Access) is a non-profit 501(c) (3) agency that champions and promotes quality sexual and reproductive health care for all. Essential Access achieves its mission through an umbrella of services, including advanced clinical research, provider training, patient education and consumer awareness, public policy and clinic support initiatives. Essential Access Health's statewide Title X network includes comprehensive family service providers, STI prevention partners, and faith and community-based outreach and education partners that collectively serve 24 California counties.

B. This program is supported by grant funds from the U.S. Department of Health and Human Services (HHS), Office of Populations Affairs (OPA) under the Family Planning Services Grant. Title X Family Planning Services Program

The Office of Population Affairs' (OPA) Title X Family Planning Program is the only federal grant program dedicated solely to providing comprehensive family planning and related preventive health services. The Title X Program is implemented through competitively awarded grants to a diverse network of public and private nonprofit health and community-based clinics. Title X plays a critical role in ensuring access to a broad range of family planning and related preventive health services for millions of low-income or uninsured individuals and others.

Title X clinics provide family planning services to women, men, and adolescents, with priority given to persons from low-income families. Title X services are voluntary, confidential, and provided regardless of one's ability to pay. For many clients, Title X clinics are their only ongoing source of health care and health education. Title X clinics must provide a broad range of acceptable and effective family planning methods and services, including:

- Contraceptive education, counseling, and methods (includes hormonal methods; fertility awareness based methods; barrier methods; abstinence; and/or permanent sterilization);
- Services centered around pre-conception health and achieving pregnancy (includes infertility services; STI prevention, education, screening, and treatment; HIV testing and referral; and screening for substance use disorders and referrals); and
- Pregnancy diagnosis and counseling.

Essential Access receives Title X funds from the U.S. Department of Health and Human Services (HHS), Office of Population Affairs (OPA) to support family planning at eligible non-profit organizations in the State of California. Eligible non-profits that are awarded Title X funds may use the funds for:

- Supporting the direct provision of family planning clinical services
- Community education, marketing, and outreach to inform a target population of family planning services
- Training of family planning personnel

- Supporting the infrastructure of the family planning program, including staff salaries and supplies

Title X will fund services for patients that have no other funding source to pay for family planning and reproductive health services. Funding is not to be used for services that can be reimbursed by other sources such as Medi-Cal, Family PACT or other local, state or federal programs. Title X program requirements mandate that all family planning services be confidential, voluntary, non-directive and be provided in a manner which honors the recipients' privacy and dignity.

To support this effort, Title X funds will be awarded to health care organizations throughout California with a focus on areas with unmet needs, and high teen pregnancy and STI rates. Title X provides support for equitable, affordable, client-centered, trauma-informed quality family planning and related health services, for all clients, with priority given to low-income individuals or those who might not otherwise have access to these health care services. Title X also funds programs that provide a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including pregnancy testing and counseling, assistance to achieve pregnancy, basic infertility services, STI services, preconception health services, and adolescent friendly health) onsite or via telehealth (telephonic or virtual).

C. Funding and Budget Parameters

Grant awards will be determined based on each Agency's number of users and the estimated Title X cost per user, with priority consideration given to agencies serving areas of high and unmet need such as high teen pregnancy and STI rates.

The estimated Title X cost per user ranges listed below are based on 2019-2020 averages.

Number of users	Estimated Title X cost per user
1000 or fewer	\$189 - \$333
1001-2000	\$118 - \$190
2001-3000	\$97 - \$119
3001-6000	\$65 - \$98
6001-20,000	\$28 - \$66
Greater than 20,001	\$5 - \$19

All applicants must submit a budget based on the cost per user range that matches the total unduplicated users in their family planning program patient base. An applicant that proposes a budget using the higher end of the cost range must justify this in the budget narrative portion of their application.

Health Centers will be assessed on the following criteria:

1. CA State Data on Teen Births and Rates
2. CA State Data on STIs
3. Volume (number of projected (unduplicated) users)

4. Administrative, financial and data reporting capability
5. Family PACT provider with one or more years of experience.
6. Title X agencies must have a partnering plan in place with a minimum of one non-traditional community partner providing services to federally identified special populations— adolescents, males, individuals with disabilities, individuals with limited English proficiency, migrants, substance using individuals and low-income populations.

Agency Onsite Reviews - Essential Access will conduct agency onsite reviews with all finalists that are not currently funded through Essential Access Health's Title X program. An agency's ability to comply with Title X program statutes, regulations, and legislative mandates will be assessed. Onsite visits will be conducted for all finalists between September 7 – 17, 2021.

Although each applicant must submit a budget proposal, agencies that are awarded Title X funding will receive funding which may be higher or lower than what was proposed as Essential Access does not know how many qualified applicants will submit proposals.

This funding is subject to the availability of federal grant funds to Essential Access. Essential Access shall promptly notify Sub-recipient, in writing, of any modification, payments (including partial payments or reductions in payments), delays, relinquishment, or cancellations of said DHHS Title X grant. Your Title X Award may be reduced or cancelled if DHHS reduces the Title X grant amount for any reason, or if Essential Access relinquishes the funds or no longer receives the Title X grant for any reason.

D. Application Eligibility Requirements:

1. Eligibility Requirements and Criteria
 - a) Applicants must be a nonprofit entity with 501(c) (3) status or be a government/public agency.
 - b) Applicants must be a Family PACT provider with one or more years of experience.
 - c) Applicants must be able to meet the financial, administrative and clinical reporting requirements of Essential Access. Agencies must have the capability to complete required reporting electronically on Essential Access' reporting website.
 - d) Applicants must be able to submit patient visit records monthly via the Centralized Data System (CDS).
2. Submitting the Application
 - a) Applicants must complete the Request for Proposal application and email all required attachments to Frances Bernabe, Director of Family Planning Programs, at fbernabe@essentialaccess.org, by 5:00 pm, on August 20, 2021. **Late, incomplete, and faxed applications will not be accepted.**
 - b) Applicants will be required to fill in the application and scan all required documents for review by the due date. Documents requiring a signature must be signed by the person authorized to legally bind the applicant.

- c) Application Review Process
 - i. **Technical Review** - Essential Access staff will review all applications to ensure that all components are complete and all required attachments are included. Applications that pass technical review will be forwarded to a staff review task force.
 - ii. **Agency Onsite Reviews** - Essential Access will conduct agency onsite reviews with all finalists before funding is awarded. An agency's ability to comply with Title X statutes, regulations, and legislative mandates and provides a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including pregnancy testing and counseling, assistance to achieve pregnancy, basic infertility services, STI services, preconception health services, and adolescent friendly health) education, information, and referral services will be assessed. Onsite reviews will be conducted between September 7 – 17, 2021 for all finalists.
 - iii. **Award Notification** – Applicants will be notified of funding and program start date by email once the new Title X program rules have been released. Applicants may not be funded at the requested level. All budget and Statement of Work (SOW) activities will be negotiated prior to the initiation of the contract.

E. Expectations for All Sub-Recipients

- 1. Agencies awarded funding are required to comply with all Program Requirements for Title X Funded Family Planning Projects including but not limited to the following:
 - a) Sliding fee scale reflecting the current Federal poverty guidelines.
 - b) Information and Education (I & E) Materials Approval
 - c) Community Participation, Education and Project Promotion
 - d) Health education protocols, including counseling protocols that encourages family participation in the decision of minors to seek family planning services and provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.
 - e) Clinical protocols for direct services, follow-up services, and referrals, which should be to providers in close proximity when feasible to the Title X site in order to promote access to services and provide a seamless continuum of care.
 - f) Protocols for reporting child abuse as required by California state law.
 - g) Liability, workers' compensation, medical malpractice and fidelity insurance naming Essential Access Health as an additional insured, or proof of self-insurance.

- h) Agencies must comply with monthly data submission requirements. Essential Access Health collects data on family planning performance measures, and will inform agencies of the process and train staff as requested.
- i) Agencies must comply with all state and local laws requiring notification or reporting of child abuse, child molestation, sexual abuse, rape, incest, intimate partner violence, or human trafficking.
- 2. Selected applicants will be required to send one administrative, one clinical, and one finance staff member to the New Agency Orientation.
- 3. Agencies are strongly encouraged to attend quarterly regional meetings with other Title X family planning providers.
- 4. Agencies will be required within the first year of funding to participate in a one-day technical assistance visit and complete Essential Access Health's Best Practices for Integrating Quality Sexual + Reproductive Health into Primary Care and Family Planning Health Worker (FPHW) trainings.

F. Grant Requirements

- 1. Agencies should expect to spend part of the Title X grant on administering the grant itself, collecting required data and reporting these data to Essential Access.
- 2. Title X program requirements prohibit the use of Title X funds for all abortion related services other than options counseling and/or referral.
- 3. Title X agencies must have a partnering plan in place with a minimum of one community partner providing services to the federally identified special populations - adolescents, males, individuals with disabilities, limited English proficiency, migrants, substance using and low income population.
- 4. Essential Access requires that all proposals use the "total budget concept." The total budget concept requires that both the budget and the application as a whole describe the total family planning program at the proposed service delivery health center(s) as it is defined by the agency. In other words, the budget must include all costs for operating the family planning program and all funding sources including Family PACT, Medi-Cal, private donations, etc. Applicants can show either a balanced budget or a surplus for the total family planning program.
- 5. Agencies that are awarded funding must agree to comply with all Federal regulations related to Title X funding, a list of these websites identifying federal requirements include:
 - a) Ensuring Access to Equitable, Affordable, Client-Centered Family Planning Services—a proposed new rule to Title X statutes, regulations, and legislative mandates by the Health and Human Services Department. <https://federalregister.gov/d/2021-07762>
 - b) Providing Quality Family Planning Services Recommendations of CDC and the U.S. Population of Affairs – define services to offer in a family planning visit and describe how best to provide services to women and men. <https://www.cdc.gov/mmwr/pdf/rr/rr6304.pdf>

- c) Code of Federal Regulations Part 200 and 45 (CFR) Part 75: Uniform Administrative Requirements, Cost Principles, and Audit Requirements - are administrative and financial requirements for all Federal grants. This information can be located: <https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=88c2f29440664f74c9444e7ff44bab5a&mc=TRUE&n=pt45.1.75&r=PART&ty=HTML>
 - d) Department of Health and Human Services (HHS) Grants Policy Statement – This document presents a compilation of important features of policies and issues related to HHS Federal Grant Awards. This document can be downloaded at: <https://www.hhs.gov/grants/grants/grants-policies-regulations/index.html>
 - e) Current Federal Poverty Guidelines - Every year the federal government publishes a new set of poverty guidelines for the calendar year. Funded agencies must utilize these guidelines when establishing and updating their sliding fee schedules. The current poverty guidelines for the calendar year can be downloaded at: <https://aspe.hhs.gov/poverty-guidelines>
 - f) Agencies must have a sliding fee schedule (schedule of discounts) developed and implemented for family planning patients with incomes between 101-250% of the Federal poverty level. Agencies should note that Title X Program Requirements state that patients cannot be denied services or be subjected to variation in the quality of services provided because of inability to pay. Fees must be waived for individuals with family incomes over 250% of the Federal poverty level who, as determined by the agency's project director, are unable, for good cause, to pay for family planning services.
 - g) Office of Civil Rights' Policy Guidance Regarding limited English proficiency (LEP) patients - This policy outlines the responsibilities under Federal law of health and social service providers that receive Federal funds to ensure that people with limited English skills have access to programs and services. This document can be downloaded at <http://www.hhs.gov/ocr/civilrights/resources/specialtopics/lep/factsheetguidanceforlep.html>
 - h) Health Insurance Portability and Accountability Act (HIPAA) – This federal legislation was enacted to establish national standards for electronic health care transactions and national identifiers for providers, health plans, and employers. It also addresses the security and privacy of health data. All health centers must be in compliance with all applicable HIPAA regulations and standards. More information can be found at: <https://opa.hhs.gov/sites/default/files/2021-03/title-x-program-requirements-april-2014.pdf>
6. Reporting and Title X Program Evaluation Visits
- a) Essential Access staff will conduct an agency program evaluation at a minimum of every three years. The purpose of this evaluation is to ensure

compliance with Title X Program Requirements and the Essential Access contract to verify reported agency activities and expenditures, and to provide technical assistance.

- b) Centralized Data System (CDS) - Agencies that are awarded funding must be able to collect and report on all data that are required in monthly and quarterly financial and semi-annual program reports utilizing Essential Access' Centralized Data System (CDS). Agencies must have data management systems in place to collect demographic and service utilization information on patients. Agencies must also have a financial management system in place to be able to effectively monitor grant funds.
 - c) Required Reports - This grant requires both programmatic and financial reports. Most reports are submitted electronically via the Essential Access Health extranet. Essential Access requires the submission of the following reports in FY2021-2022:
 - i. Program Reports:
 - a. Semi-annual Progress Reports (SSR) which includes the Federal Family Planning Annual Report (FPAR)
 - ii. Financial Reports:
 - a. Quarterly Statement of Revenue and Expense Report (SRER).
 - iii. Centralized Data System (CDS) monthly patient visit data
7. Reimbursements: Agencies that are awarded funding will be reimbursed by Essential Access in arrears on a quarterly basis after completing the Statement of Revenue and Expense Report (SRER) and submission of required backup documentation.
8. Continuation Applications - Agencies that are awarded funding will be required to complete an annual Refunding Application in order to receive continued funding.

G. Required Sections

- 1. **Agency Information** - All sections of the Request for Proposal must be completed on the application form. A brief summary of each section include:
 - a) Agency Profile - This section requires information regarding your agency information names, titles, phone numbers and email addresses of key staff.
 - b) Organizational Structure - This section requires information regarding your agency's organizational structure, family planning program, service area(s), target population and existing services and resources. Information is required in narrative form. Please note that each narrative box has a specific word and character limit.
 - c) Community Health Education and Outreach Plan - This section requires information regarding the most recent community needs assessment, detailed demographic information on target populations and a description of the agency's community education and outreach plan.

2. **Financial Information** – This section requires policies and procedures to be in place to manage the agency’s financial functions including billing and collections, third party contracting, sliding fee scale, financial screening of patients, financial audits and insurance information.
3. **Services** - This section requires information regarding the services provided by the agency, including personnel services, related protocols, clinical management information and ancillary services.
4. **Quality Assurance and Data Collection** - This section requires information regarding the activities related to an agency Quality Assurance/Quality Improvement (QA/QI) plan and data collection and electronic health systems the agency uses. Computer Systems and Security Policies will need to be verified.
5. **Required Attachments** - The following required attachments must be submitted along with the completed application:
 - a) Organizational chart listing family planning program staff
 - b) Proof of non-profit status
 - c) List of Board of Directors, governing or advisory Board
 - d) Onsite pharmacy license or dispensary permit
 - e) 2020 OSHPD report (include for proposed clinics)
 - f) Most recent financial audit report
 - g) Most recent A-133 audit report (if applicable)
 - h) Management letter of recommendations
 - i) 2021 or most recent sliding fee scale
 - j) Proposed budget and budget narrative
 - k) List of proposed clinics and projected number of users

H. Budget Introduction

1. Essential Access receives Title X funds from the U.S. Department of Health and Human Services (HHS), Office of Population Affairs (OPA) to support family planning programs in the State of California. In addition to supporting the direct provision of family planning services to patients, applicants that are awarded Title X funds may use the funds for marketing and outreach to inform a target population of family planning services. Title X funds should be used to improve continuity of care, including the provision of onsite services which are currently only available by referral, thus increasing the number of patients served in the family planning program. The Title X grant is to be used as a payer of last resort to fund family planning and reproductive health services for patients that have no other funding source. It is not to be used for services that can be reimbursed by other sources such as Medi-Cal, Family PACT or other state or federal programs.
 - a) Essential Access requires that all proposals use the “total budget concept.” The “total budget concept” requires that both the budget and the application as a whole describe the total family planning program as it is defined by the applicant. In other words, the budget must include all costs for operating the family planning program and all revenue sources

for the family planning program, including Family PACT, Medi-Cal, private donations, etc.

- b) In addition to the Federal funds requested, the budget must include non-federal contributions needed to carry out the services defined in the application.
- c) The items listed below are selected cost items that are NOT allowed with Title X funds per OMB 2 CFR Part 200 and HHS 45 CFR Part 75.
 - i. Costs of alcoholic beverages are not allowed.
 - ii. Advertising and Public Relations - Federal Title X funds cannot be used for meetings, other events related to fund raising or other organizational activities such as cost of displays, demonstrations, and exhibits; costs of meeting rooms, hospitality suites, and other special facilities used in conjunction with shows and other special events. Costs of promotional items and memorabilia, including models, gifts, and souvenirs and costs of advertising and public relations designed solely to promote the agency are not allowed.
 - iii. Bad Debts - including losses (whether actual or estimated) arising from uncollectible accounts and other claims, related collection costs, and related legal costs, are not allowed.
 - iv. Contributions and Donations by the agency to others are not allowed.
 - v. Entertainment Costs - Amusement, diversion, social activities, ceremonials, and costs relating thereto, such as meals, lodging, rentals, transportation, and gratuities are not allowed.
 - vi. Fines and Penalties - resulting from violations of, or failure of the agency to comply with, Federal, State, and local laws and regulations are not allowed.
 - vii. Goods or Services for Personal Use - the agency's employees are not allowed regardless of whether the cost is reported as taxable income to the employees.
 - viii. Housing and Personal Living Expenses - housing allowance (e.g. depreciation, maintenance, utilities, furnishings, rent etc.) and personal living expenses for the agency's officers are not allowed as fringe benefits or indirect costs whether the cost is reported as taxable income to the employees or not.
 - ix. Costs incurred for interest on borrowed capital or temporary use of endowment funds, however represented, are not allowed.
 - x. Fundraising - similar expenses incurred solely to raise capital or obtain contributions are not allowed.
 - xi. Investment Management Costs - counsel & staff, and similar expenses, are not allowed.
 - xii. Lobbying - Costs associated with any of the following lobbying activities are not allowed: a) attempts to influence election outcomes; b) contributing to political causes; c) attempts to

influence Federal or State legislation through virtually any communicative device; and d) legislative liaison activities when performed in support of unallowable lobbying.

- xiii. Losses on Other Awards - Any costs that exceed award income are not allowed as costs for any other award.
- xiv. Memberships - Costs of memberships in country, social, or dining clubs are not allowed.
- xv. Capital Expenditures - for general-purpose equipment, buildings and land are not allowed as direct charges. Capital expenditures for improvements to land, building and equipment, which materially increase their value or useful life, are not allowed.

2. **Special Notes**

- a) Any costs related to abortion as a method of family planning are not allowed per Section 1008 of Title X Statute and 42 CFR 59.5.
- b) Depreciation charges to Title X grants must meet the definition of use charges as described in OMB CFR, Part 200, and HHS Grants Policy Statement 45 CFR Part 75.
- c) Cash incentives to patients are not allowed. Non-cash incentives to patients such as gift certificates, grocery coupons, etc., are allowed.

3. **Budget** - This section is composed of four main categories: Personnel Services Patient Care, Equipment and Other Costs, to assist the agency in developing a budget.

- a) Personnel Services - This category lists the position/title of the personnel budgeted. Similar full-time (F/T) or part-time (P/T) positions having annual salaries are within the same salary range may be combined. Combine all the salaries of the employees and average the percentage of time into one row. Otherwise, list the position/title separately and enter the actual annual salary. Please note that positions split between functions should be budgeted accordingly. OPA has a salary limitation based upon Executive Level II of the Federal Executive Pay Scale. The amount is \$199,300, effective the first pay period beginning on or after January 1, 2021.
- b) Clinical Providers - The staff primarily involved in activities related to the provision of medical services for the prevention, diagnosis, treatment, and rehabilitation of an illness or injury. This sub-category is comprised of the following:
 - i. Physicians - including general family practitioners, pediatricians, obstetrician/gynecologists and other medical/surgical specialist that generate encounters.
 - ii. Mid-level Practitioners – include the following types:
 - Nurse Practitioner - A nurse who has the formal academic and clinical training to provide independent medical services under the direction of a medical doctor.

- Physician's Assistant - A skilled provider qualified by formal academic and clinical training to provide independent medical services under the direction of a medical doctor.
 - Nurse Midwife - A certified nurse-midwife is a health care provider who has been trained in both nursing and midwifery.
- c) Other Health Services Personnel - Staff involved in the provision of services other than medical or dental, such as education, social services, case management, allied health, and mental health services. Examples include Family Planning or Health Educator, Medical Social Worker, and Outreach Worker. This can also include Nurses and Medical Assistants.
- d) Ancillary Services Personnel - Staff performing laboratory and pharmaceutical services such as Medical Technologists, Laboratory Technician, Pharmacists, and Pharmacist Assistants.
- e) Administrative Personnel - Staff primarily involved in activities related to the administration or operation of an overall project. This sub-category is comprised of the following types of personnel:
- Administration Personnel - performing general administration activities such as Project Directors, Administrators, Accountants, Secretaries, Project Managers, Evaluators, Trainers, Medical Records, Receptionist, and clerical staff not directly providing health care services.
- f) Facility Personnel - who maintains the facility, usually housekeeping and maintenance personnel performing custodial tasks and minor repairs on equipment. Driver and security personnel should also be included in this sub-category.
- g) Fringe Benefits - comprises actual payroll related expenses incurred for employees. The most common fringe benefits budgeted includes Social Security expenses (FICA), State Unemployment Insurance (SUI), Worker's Compensation Insurance, Health Insurance, and Retirement benefits. All final budgets must show the complete detail of fringe benefits claimed. A flat rate with no breakdown is not acceptable.
- h) Patient Care
- i. Clinical Services - are usually contractual non-salaried clinical services providers such as Physicians, Nurse Practitioners and Lab Technicians.
 - ii. Laboratory Services - include laboratory test and supplies, Pap smears, urinalysis, Chlamydia and other laboratory related services.

- i) Equipment - purchases are budgeted based on the following criteria - The current capitalization policy of a Title X agency or the \$5,000 federal equipment limit, whichever is lesser. However, it is contingent upon the approval of OPA and agencies must submit a justification for any Title X equipment purchase. The equipment budget should show quantities and unit costs when entered.
- j) Other Costs - are categorized under the following accounts:
 - i. Consultant - constitute all non-patient care personnel services from non-employees. The most typical consultants budgeted are those who provide bookkeeping or accountant services, in-service training, or specific forms of technical assistance. The Consultant budget should detail the type of service and the rate.
 - ii. Medical Supplies – details all major medical supplies by type at actual expected cost. Donated supplies should be valued at fair market value. Estimate miscellaneous medical supplies at a flat rate per patient. List small medical equipment with unit cost of less than \$5,000, depending on the agency’s amortization policy.
 - NOTE: You may not use Title X Federal dollars to purchase contraceptive methods or medications and also bill a fee for service program (i.e. Family PACT, Medi-CAL). This is a misappropriation of funds.
 - iii. Office Supplies - include all office supplies and all small office equipment with a unit cost of less than \$5,000 depending on the agency’s amortization policy. The amount budgeted must be both reasonable and directly related to family planning program.
 - iv. Duplication and Printing - is for internal use of in-house duplication and outsourced printing with exception of health education supplies.
 - v. Health Education Supplies - include all specifically identified materials and supplies including in-house duplication and outsourced printing expenses related to health education.
 - vi. Utilities and Communication – is expense for items such as telephone, utilities, facilities, and postage.
 - vii. Travel Expense - Total costs can be determined by travel purpose, number of travelers, and trips.
 - Every year Essential Access hosts a statewide business meeting for all Title X funded agencies. It is mandatory that one administrative and one clinical staff from your agency attend the meeting. You should plan for the costs of attending the one (1) day business meeting in your budget.
 - Local travel – Mileage and parking fees are the most common local travel expenses. Applicants may use their mileage rate to allocate the cost; however, the rate must not exceed the prevailing IRS mileage rate.

- In-State/Out-of-State Travel – include airline tickets, hotel, meals, taxis, car rental, airport parking, and other related incidental costs.
 - Meetings and conferences – registration fees, room rental and facilities to conduct a meeting or conference, and other costs related to conferences and meetings are the most common expenses.
- viii. Lease/Rental Expenses – include office space, machinery, and equipment leases are the most common expenses.
- ix. Other Expenses - all other expenses not identified in the above accounts must be itemized to determine cost allowability.
- x. Approved Indirect cost –Title X indirect cost policy allows agencies with an approved HHS negotiated rate to charge the prevailing approved rate. Agencies that utilize non-HHS approved rates (i.e. state, county, local government rates) are limited to their actual rate or 22.87% of total direct costs less capital equipment, subcontracts, and patient care costs, whichever is lesser. Agencies that have never received a federally negotiated indirect cost rate agreement may use a de minimis rate of 10%.
4. Summary of Applicant and Other Revenue. This is an agency summary budget according to different sources of revenue for Applicant and Other. Applicant and Other represents the amount of funds used to operate the total family planning program aside from those requested from Essential Access. These funds can be program generated income, other funding sources, in-kind donations, and applicant funds.
- a) It is necessary to detail the sources of Applicant and Other funds into one of the following and described in the agency budget narrative.
- i. Applicant Funds - These are agency's general funds and non-program generated revenues earned outside the family planning program. This also includes in-kind or cash donations and other general revenue of the agency.
 - ii. Family PACT (fee for service) - Revenue received for Family PACT services.
 - iii. Medi-Cal - Revenue received for Medi-Cal services.
 - iv. Other Federal - List all other Federal grant funds that support services within the scope of the family planning program.
 - v. State and Local - List State and Local government grant funds that support services within the scope of your agency's family planning program (i.e. OFP grants).
 - vi. Private - List all private grant funds that support services within the scope of your agency's family planning program.
 - vii. Third Party Payers - These are fee for services type of revenue such as Patient Fees, Private Health Insurance and other third party sources not reported above.

The applicant must be able to provide at least 10% total revenue to match the Federal Title X (Essential Access) fund from other non-federal revenue sources (i.e. General funds, Patient Fees, and other Third Party Payers).

I. Timeline for Application Process

1. June 4, 2021.....Request for Proposal Release
2. August 20, 2021.....Application Submission Deadline
3. September 7-17, 2021..... Onsite Reviews for Finalists



**Title X Family Planning Services Program
Request for Proposal (RFP)**

Cover Page

Organization Name:

Address:					
City:		State:	CA	Zip Code + 4 Digits:	
DUNS #:					
Tax ID #:					

Contact Name:	
Telephone:	
Email address:	

Title X Family Planning Services Program Request for Proposal (RFP)

Checklist

The items listed below are all required for the application to be considered complete. Please place a check in each box after you have reviewed and included in the application. Submit all materials to Frances Bernabe, Director of Family Planning Programs, via email at fbernabe@essentialaccess.org, by 5:00 pm, August 20, 2021.

Request for Proposal

Cover Page	<input type="checkbox"/>
Applicant Organization Name and Address	<input type="checkbox"/>
Applicant Contact Name, Telephone, Email	<input type="checkbox"/>
DUNS #:	<input type="checkbox"/>
Tax ID #:	<input type="checkbox"/>
Request for Proposal Application	<input type="checkbox"/>

Attachments

Attachment Name	Attached
Organizational Chart listing family planning program staff	<input type="checkbox"/>
Proof of Non-profit status	<input type="checkbox"/>
List of Board of Directors, Governing and/or Advisory Board members	<input type="checkbox"/>
Onsite Pharmacy License or Dispensary Permit	<input type="checkbox"/>
2020 OSHPD Report	<input type="checkbox"/>
Most Recent Financial Audit Report	<input type="checkbox"/>
Most Recent Single Audit Report (if applicable)	<input type="checkbox"/>
Management Letter of Recommendations	<input type="checkbox"/>
2021 or Most Recent Sliding Fee Scale	<input type="checkbox"/>
Proposed Budget and Budget Narrative	<input type="checkbox"/>
List of Proposed Clinics and Projected Number of Users	<input type="checkbox"/>



Application

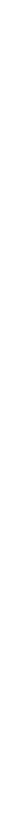
I. Agency Information

A. Agency Contact Information

B. Organizational Structure

1. Briefly describe the overall organization and family planning program.

350 word limit



2. Briefly describe the service area and include information (by zip code if available). Describe in detail your target population(s): include pregnancy rates, teen birth rates, STI/HIV rates, poverty status, domestic violence, cultural/linguistic characteristics, and indicate where there are unmet or high needs among the populations served, and any barriers patients have in accessing care.

500 word limit

3. Describe existing services (primary care, sexual and reproductive, preventive, etc.) offered at the agency.

300 word limit

4. Please provide a description of your strategy to broaden access to family planning services. Strategies may include but are not limited to adding satellite sites, mobile units, increasing clinic hours, placing providers in health centers at community colleges or universities, opening new clinics, and adding existing clinic sites to the Title X network.

500 word limit

5. List the Year the agency became a Family PACT provider. _____
6. Is the agency a Medi-Cal Managed Care Provider? Yes ☐ No ☐
If yes, list the date of last audit. _____
7. Are any agency health centers school-based? Yes ☐ No ☐
If yes, please name the school and list the year it was opened. _____
8. Describe any community partnerships the agency has with other health care organizations.

300 word limit

C. Community Health Education and Outreach Plan

1. Describe how the agency conducts community education and outreach activities and how the agency addresses sexual and reproductive health needs of the community.

500 word limit

2. Please list the date the agency conducted the last community needs assessment. _____

II. Financial Information

A. Financial Management

1. Identify the Financial Management Accounting System used and describe how the system separates receipt and disbursement of funds of each grant or funding source.

200 word limit

2. Is the Financial Management Accounting System able to track revenue and expense transactions for family planning and Title X separately (ie: Family PACT)? Yes ☐ No ☐ If no, describe the time needed to establish tracking.

200 word limit

3. What is the agency accounting base? Check box for

Cash ☐ Accrual ☐

4. Are timesheets or another method used to track personnel time spent on projects?

Yes ☐ No ☐

B. Financial Billing and Collections

1. Does the agency utilize in-house billers? Yes ☐ No ☐

If no, please identify any third-party biller(s).

350 word limit

2. Are claims submitted electronically? Yes ☐ No ☐

3. Describe process to handle claim denials.

350 word limit

4. Are you currently or planning to bill private insurance companies for services?

- a. Yes currently bill ☐
- b. Planning to bill ☐
- c. Considering whether to bill ☐
- d. No current plans ☐
- e. If no, please explain

C. Sliding Fee Scale

1. Does the agency sliding fee scale go up to 250% of federal poverty level?

Yes ☐ No ☐

2. Is the sliding fee scale entered into the practice management system?

Yes ☐ No ☐

3. Can the practice management system incorporate multiple sliding fee scales?

Yes ☐ No ☐

4. Please describe any recent analysis of costs where the agency has assessed family planning services.

250 word limit

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D. Financial Audit

1. Agency Fiscal Year From _____ To _____
 2. Were there significant and/or material findings for the most recent Single Audit? Yes No N/A_____
- If yes, describe the Corrective Action Plan.

300 word limit

3. Did the agency receive any Management Letter Recommendations?

Yes ☐ No ☐

If yes, describe the Corrective Action Plan.

300 word limit

4. Has the agency incurred losses in two or more consecutive years?

Yes No

If yes, what is the projected income or loss for the upcoming year? Please describe how the agency intends to address the deficit.

200 word limit

E. Insurance Information

1. Types of services

- a. General Liability
- b. Workers' Compensation
- c. Professional Liability
- d. Fidelity
- e. Other _____

Company Name	Expiration Date	Dollar Limit

III. Services

F. Clinical Information

1. Provide the number of family planning patient (unduplicated) visits in 2020

2018
2. Provide number of unduplicated individuals served for all patient related services in 2020. _____

B. General Protocols

1. All Title X funded agencies are required to use protocols based on identified national practice standards. **[Check all that apply]**

- a. American Cancer Society ☐
- b. Agency for Health Care Policy ☐
- c. Centers for Disease Control ☐
- d. American College of OB and GYNs ☐
- e. American Society for Colposcopy and Pathology ☐
- f. Agency for Healthcare Research and Quality ☐
- g. Other ☐

2. What is the date of last clinician training on protocols, policies and procedures?
Date: _____

C. Protocols

1. Adolescent Counseling for Family Planning Protocol
2. Child Abuse Reporting Protocol
3. Sexual Coercion Protocol
4. Human Trafficking Protocol
5. Pregnancy Testing Protocol
6. Family Involvement Protocol

		1	2	3	4	5	6
a.	Is this protocol in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	If yes, date written						
c.	Date of last review						

- d. Staff positions that read and sign protocol. **[Check all that apply]**

[illegible]

- v. Receptionists
- vi. Financial screeners
- vii. CHW's
- viii. Other

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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D. Clinical Management

1. Have the clinicians been trained to place and remove devices:

IUD		Nexplanon	
Yes	No	Yes	No
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If yes, please indicate the number trained. # _____

If no, indicate where patients are referred. _____

2. Indicate the percentage of patients using Long Acting Reversible Contraceptives (LARCs) at the health centers. % _____

IV. Quality Assurance and Data Collection

A. Quality Assurance/Quality Improvement

1. Is the agency currently designated as a Patient Centered Medical Home (PCMH)? Yes ☐ No ☐
if yes, at what level? _____

2. Provide an overview of the quality improvement activities that are performed at your health center. Describe any measures that you are collecting to assess the family planning services.

350 word limit

3. Patient Satisfaction and Patient Engagement
 - a. How often does the agency conduct patient satisfaction surveys or engage patients in quality assurance? _____
 - b. Date of last survey? _____

- c. Describe two or three actions taken as a result of survey results.

250 word limit

B. Data Collection

1. Please list the agency Practice Management System (PMS)? _____
2. Are there plans to change or update the PMS in the next two years?

Yes ☐ No ☐

If yes, identify the proposed system.

100 word limit

3. Does the agency currently operate with Electronic Medical Records (EMR)?
Yes No

If yes, please identify the current EMR vendor.

If no, please describe plans to adopt EMR and timeline for completion.

100 word limit
