

**Division of Chronic Disease, Primary Care
and Rural Health**



Regional Coordinator Request for Application
Indiana Department of Health
Cancer Early Detection Section
Indiana Breast and Cervical Cancer Program



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Background

The Indiana Breast and Cervical Cancer Program (IN-BCCP) is the Hoosier implementation of the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) which is a cooperative agreement with the Centers for Disease Control and Prevention (CDC). The IN-BCCP provides access to breast and cervical cancer screenings, diagnostic testing, and treatment for underserved and underinsured women who qualify for services.

Through the IN-BCCP, female Indiana residents may qualify for free breast and cervical cancer screenings and diagnostic tests. Services provided include:

- Colposcopies (with or without biopsies)
- Liquid-based cytology tests
- High-risk panel HPV testing/ Pap smears
- Office visits
- Pelvic exams/tests
- Clinical breast exams (CBEs)
- Mammograms (screening and diagnostic)
- Diagnostic breast ultrasounds
- Breast biopsies
- Consultations

IN-BCCP is held to data collection and management standards and utilizes a network of regional coordinators to support this effort, and is currently seeking regional coordinators to continue this life-giving work.

Regional coordinators are responsible for:

- Seeking and enrolling eligible IN-BCCP clients
- Case management of non-IN-BCCP clients at or below 200% of poverty level who have need for breast and cervical cancer screening who are un- or underinsured
- Enrolling and supporting eligible IN-BCCP clients
- Collecting and correcting patient data per CDC requirements
- Engaging and training IN-BCCP providers
- Enrolling and supporting eligible IN-BCCP clients
- Reducing structural and financial barriers for clients



- Managing and correcting claim entry
- Serving as the front line for IN-BCCP client and provider needs and taking concrete actions to resolve their issues
- Compliance with grant standard procedures and deadlines
- Seeking additional funding to provide services for clients that fall outside of the IN-BCCP guidelines
- Providing in kind and match for documentation for ongoing reapplication for these services
- Participating in quality assurance and organizational activities as directed by IDOH IN-BCCP staff including, but not limited to, regular communication with the nurse consultant and evaluator as requested
- Serve as a subject matter expert on IN-BCCP and cancer early detection efforts

Coordinators are expected to engage in overall program improvement efforts and participate in quarterly all IN-BCCP staff meetings, and if applicable, coordinating with the Indiana WISEWOMAN program in counties served by that program.

Additional information about the program and the provider manual can be found at the IN-BCCP website here: [IDOH Cancer-Early Detection or www.in.gov/health/cdpc/cancer/early-detection/](http://www.in.gov/health/cdpc/cancer/early-detection/)

Funding Details and Parameters

Up to four awards will be made with an expectation that awardees can serve up to half the state in a geographic area. IN-BCCP requires that all counties in the catchment area selected be served by a regional coordinating office and additional points will be granted for covering contingent counties within reason. For more information on scoring, see the following section.

Respondents may propose the counties that they wish to serve. IDOH reserves the privilege to negotiate assigning grantee counties and adjust budgets to best meet the needs of IN-BCCP clients. Clinical systems which apply for regional coordinators shall be responsible for serving all clinical providers in a given county rather than the clinical system solely.

Grantees serve as a liaison between IDOH, clients and clinical settings including billing departments. Grantees are responsible for supporting clients eligible for breast and cervical cancer screening through completion. Grantees are responsible for assuring data collection and timely submission of provider claims as well as supporting linkages to other community and/or grant funding for screening for ineligible clients. Greater details are provided in the application directions.



Grantees may propose a budget to serve the needs of the clients. It is expected that the cost be less than \$110 per client served and cost will be considered in the selection process. Although recipients may propose a higher cost per client served, the State of Indiana is looking for the highest quality of services at a reasonable cost. There is no set cap for each county selected nor is there a minimum expectation for the number of clients served in each county, although high-poverty, high-population counties are expected to serve a greater number of clients. (If requested, IN-BCCP can provide historical data on numbers served by county.) IN-BCCP's total number of clients served across the state is limited to 4,135 and generally is distributed by number of possible clients served in an area. As part of the RFA response, applicants will identify counties served and the projected number of possible clients served. Total for all awards to serve all 92 counties is capped at \$450,000 (points will be awarded for cost-effectiveness and efficiency in services in the budget section).

IDOH reserves the right to negotiate costs and counties served based on what best serves clients in Indiana.

Requirements

By virtue of applying for this funding opportunity, the applicant agrees to:

- Accept electronic funds transfer (EFT)
- Be a registered vendor with the State of Indiana prior to payment
- Comply with all grant requirements and attend training as proposed by IDOH
- Provide interpretation for clients at their offices as needed

Timeline

- Nov. 13 2024—Release of Request for Application
- Nov. 18, 2024, at 11:30a.m. EST—Optional Bidder's Meeting via Teams (Additional information provided at the end of the application)
- Nov. 13-Dec. 14, 2024 —Technical assistance available as needed. Answers to questions will be posted at a minimum every two weeks during this period through the end of submission to <https://www.in.gov/health/cdpc/cancer/early-detection/> under early detection. To submit questions, contact the cancer early detection section director at jgries@health.in.gov.
- Jan. 31, 2025—Applications are due
- March 30, 2025 or sooner—Notification of awardees



- March 30-June 29, 2025—Transition plan implementation, if needed
- June 30, 2025—Grant begins for IN-BCCP regional coordinators

Funding Restrictions

The following limitations must be considered:

- Awardees may not use funds for research
- Awardees may not use funds to provide food or beverages
- Awardees may not generally use funding for the purchase of furniture or equipment
- Awardees are not allowed to bill a blanket overhead charge
- Awardees must comply with IN-BCCP standard operating procedures
- Awardees must participate in required meetings and training per IDOH request
- Awardees must comply with patient privacy and permission requirements and laws
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies and services
- Awardees may not use funds for any agency publicity purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body



APPLICATION FORM

Please use Segoe UI 12-point font when responding to application questions. Applications must be received via e-mail to Jgries@health.in.gov at or by close of business on **Jan. 31, 2025**.

Application narrative should not exceed 10 pages. Budget shall be submitted using the attached budget template format and should not exceed five pages.

Applicant

Name of Agency: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Existing IN-BCCP Regional Coordinator (Indicate response): Yes No

Indiana Bidder Identification: _____

Indiana Supplier Identification: _____

Contact Person

Contact Name and Title: _____

Direct Phone: _____

E-mail Address: _____



Proposal Narrative

- Page limit of 10 pages not including the application form
- Possible points for new IN-BCCP Regional Coordinator (48 plus 2 bonus points)
- Possible points for continuing IN-BCCP Regional Coordinator (61 plus 2 bonus points)

The narrative should include all sections and provide specific examples of how the agency has historically engaged in activities that are congruent with the aims of the IN-BCCP. Please note that the minimum score for this section for funding consideration is 36 for new regional coordinators and 46 for existing regional coordinators.

1. Client Service Orientation

For new IN-BCCP regional coordinator candidates, describe your experience and expertise in serving clients with limited access to healthcare and/or insurance. Describe methods that have been employed to reach hard-to-reach clients or Indiana's identified targeted populations of Black, rural or trans populations. Describe methods by which interpretation services will be provided and coordinated with IN-BCCP. Include a list of any available interpretation languages available at the site. Spanish will be required. If the organization does not have Spanish interpretation currently, provide a plan for assuring Spanish interpretation no later than June 30, 2025.

(8 points)

For existing IN-BCCP regional coordinators, describe your experience and expertise in serving clients with limited access to healthcare and/or insurance. Using data and/or success stories, describe methods that have been employed to reach hard-to-reach clients or Indiana's identified targeted populations of Black, rural or trans populations. Identify trends in increasing reach overall as well as increasing reach of targeted populations since the beginning of the grant period for CDC 22-02. Describe methods by which interpretation services will be provided and coordinated with IN-BCCP. Include a list of any available interpretation languages available at the site. Spanish will be required. If the organization does not have Spanish currently, provide a plan for assuring Spanish interpretation no later than June 30, 2025. **(10 points)**



2. Ability to serve clients across counties, across healthcare providers and across partnerships

For new IN-BCCP regional coordinator candidates, identify proposed served counties. Using data, describe proposed number of clients served across the proposed counties. Provide examples of existing partnerships with healthcare providers in the region and navigation across providers to assure adequate coverage and ease of transition to a new regional coordinator. Two points will be granted for a stated agreement for additional counties or contingent counties not currently proposed if it better serves the state. **(7 points + 2 points)**

For existing IN-BCCP regional coordinators, identify proposed counties served. Using data, describe proposed number clients served across the proposed counties and support trends of better numbers and service to providers and clients. Provide examples of existing partnerships with healthcare providers in the region and navigation across providers to assure adequate coverage. Provide previous examples of supporting clients across providers and counties historically. Two points will be granted for a stated agreement for additional counties or contingent counties not currently proposed if it better serves the state. **(8 points + 2 points)**

3. Data Collection Capacity

For new IN-BCCP regional coordinator candidates, describe previous data collection efforts from providers and for grantors. Describe agency procedures to secure health information and comply with HIPAA standards. Describe innovative methods of obtaining and cleaning data for reporting. Describe experience in using online databases to maintain data. Describe methods used to assure that appropriate permission has been granted to share data. **(6 points)**

For existing IN-BCCP regional coordinators, describe previous data collection efforts to enter and clean data in Med-IT. Using historical data, provide information on the time it takes for cycles to be completed and claims to be paid utilizing Med-IT. Describe how you have supported provider efforts to enter data and utilize Med-IT. Describe how the region has worked with the nurse consultant and the data manager to improve Minimum Data Elements (MDE) performance. Describe agency procedures to secure health information and comply with HIPAA standards. Describe methods that the regional coordinating office has used to correct and minimize the length of error reports. Describe methods used to assure that appropriate permission has been granted to share



data. Provide information on previous timelines in closing grant years in a timely manner since the implementation of Med-IT. **(10 points)**

4. Medical and Billing Expertise

For both potential and existing IN-BCCP regional coordinators, list relevant expertise in breast and cervical cancer screening such as patient navigation, medical translation, case management and insurance navigation, or describe experience in working claims and billing such as understanding of CPT codes and/or claim support. **(8 points)**

5. Fiscal Management Practices

For new IN-BCCP regional coordinator candidates, describe agency fiscal processes and checks and balances. Describe existing agency grant management practices for state funding. Describe existing grant management practices for funds from other sources. Describe existing partnership efforts, if anything, with the Indiana Breast Cancer Awareness Trust (IBCAT). Provide at least one example of how IN-BCCP funds will be managed efficiently and economically. **(5 points)**

For existing IN-BCCP regional coordinators, describe fiscal processes and checks and balances. Describe existing grant management practices for state funding. Describe existing grant management practices for funds from other sources. Describe existing partnership efforts, if anything, with the Indiana Breast Cancer Awareness Trust (IBCAT). Provide at least one example of how IN-BCCP funds have been managed efficiently and economically. Provide cost per woman served averages for the last three years and identify the amount of funds and the percentage of funds of total contract that were returned to the state for the last three years. **(8 points)**

6. Provider Training and Recruitment Capacity

For new IN-BCCP regional coordinator candidates, describe methods previously employed by the candidate to recruit community and healthcare providers to improve the quality of care for underserved populations. Describe methods, especially innovative ones, to provide training, refreshers and quality assurance for a wide geographic region and organizational size of healthcare providers. **(3 points)**

For existing IN-BCCP regional coordinators, describe methods previously employed by the candidate to recruit community and healthcare providers to improve the quality of care for underserved populations. Describe methods, especially innovative ones, to provide training, refreshers and quality assurance



for a wide geographic region and organizational size of healthcare providers. Provide examples of efforts employed to recruit and train providers previously and include the number of newly engaged or re-engaged providers in the last two years. **(6 points)**

7. Ability to Comply with Standard Operating Procedures

For both potential and existing IN-BCCP regional coordinators, list the ways that the agencies manage to comply within the confines of highly regimented policies and procedures; describe times the agency has had to maintain ongoing updates to existing procedures; describe the methods the agency uses to support training and refreshers on standard operating procedures; provide specific examples of times the agency has suggested and supported changes to standard operating procedures. **(6 points)**

8. Agency Fit

For both potential and existing IN-BCCP regional coordinators, list the ways that serving as a regional coordinating office will further the mission and efforts of your agency overall. Describe how does or how will serving as a regional coordinating office support and be supported by other agency efforts. Describe in detail any ways that these funds will be leveraged to better meet the needs of Indiana citizens to meet IDOH's mission to promote, protect and improve the health and safety of all Hoosiers. **(5 points)**



Letters of Support from existing IN-BCCP providers (4 points)

Submit a minimum of three but no more than four letters of support from current IN-BCCP providers who have a relationship with the applicant with examples of high-quality service to targeted clients. Please note these should be letters of support from the healthcare system, not individual clinics within the same healthcare system. (For existing IN-BCCP regional coordinators, examples of concrete collaboration for the IN-BCCP regional coordinators should be included in the letters). **(4 points)**

Attachments

- Job descriptions for all employees who will be billed to the IN-BCCP project including percentages of time specifically for the IN-BCCP Project. Resumes for existing staff who will be funded should grant dollars should be included. (Must be included for scoring to occur)
- Health Information and HIPAA Procedures. Include agency policies and procedures for handling health information and sharing information with clients and providers (Must be included for scoring to occur)
- If available, most recent agency audit report
- If available, agency annual report



Budget Proposal and Narrative (15 points). Page limit for budget and budget narrative is five pages or less.

Include a detailed budget narrative using the attached templates. Other formats with the same information will be accepted if the applicant prefers.

Budget will be scored on completeness and include an analysis of costs and benefits for Indiana citizens and IDOH. Applicants should provide detail on individual costs and projected expenditures. Salary and fringe costs should provide detail by individual billed to the project including their tasks and contribution to grant deliverables. IDOH reserves the right to negotiate better or different rates or ask for additional information.

IDOH reserves the right to request that the grantee add or remove counties from the proposal and submit a revised budget. In a written statement, the grantee should propose a matching fund from their agency or their proposed counties to address clients who may need additional or different breast or cervical cancer screening.

Grantees may use a different form or spreadsheet for their budget proposal and narrative, but all components listed should be included. Enough detail to justify the expenses is expected. **(15 points)**



Budget Proposal Narrative Template

Description of Expense	Total Cost
<p>Personnel</p> <p><i>For each requested position, provide the following information: 1) name of staff member occupying the position, if available; 2) annual salary; 3) percentage of time budgeted for this program; 4) total months of salary budgeted; and 5) total salary requested. Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of grant deliverables. Include the number of hours expected as well as the hourly rate to calculate total personnel costs by position.</i></p> <p><i>A minimum of one FTE must be allocated for this program. Additional positions can be identified to bill to this grant.</i></p>	\$0.00
<p>Fringe</p> <p><i>Include rate and percentage of benefits and fringe allocated to this grant for any personnel billing to this grant. Fringe benefits can be computed by an established rate. If fringe benefits are not calculated using a percentage of salaries, itemize how the amount is determined for each salary and wage being requested.</i></p>	\$0.00
<p>Consultant</p> <p><i>Include rate and general services provided by an outside consultant. This category should be used when hiring an individual to give professional advice or services (e.g., training, expert consultant, etc.) for a fee, but not as an employee of the grantee organization. For each consultant include: Name of consultant, organizational affiliation, nature of services to be rendered, relevance of service to project, expected rate of compensation and the method of accountability.</i></p>	\$0.00



<p>Contractual</p> <p><i>Include rates and general services provided through a contractual arrangement. For each contractual relationship include: name of contractor, organizational affiliation, nature of services to be rendered, relevance of service to project, expect rate of compensation and the method of accountability.</i></p>	\$0.00
<p>Supplies</p> <p><i>Supplies are expendable items with a limited lifespan. Individually list each item requested and provide the following information: 1) specify the type of item, as appropriate; 2) number needed; 3) unit cost of each item; and 4) total amount requested. General office supplies can be given as a general per person sum. Computer costs are included in this category.</i></p>	\$0.00
<p>Equipment</p> <p><i>Include any projected costs for equipment. Generally, equipment costs are not allowed but minimal improvements necessary for the program such as updated electronic capacity may be allowed. Equipment is defined as tangible, non-expendable personal property (including exempt property) that has a useful life of more than one year AND an acquisition cost of \$2,000 or more per unit.</i></p>	\$0.00
<p>Travel</p> <p><i>Estimate the number of in-state mileage reimbursed at \$0.49 per mile. For example, 100 miles x \$.49/mile = \$44.90 total mileage. Other costs such as hotel and per diem must be in alignment with IDOH standards.***</i></p>	\$0.00
<p>Training</p> <p><i>Include any proposed training and educational costs for program personnel.</i></p>	\$0.00



Other: <i>Detail any other expenditures not previously detailed.</i>	\$0.00
TOTAL	

*****For State of Indiana travel reimbursement rates, visit <https://www.in.gov/idoa/procurement/travel-services/>**



Optional Applicants' Question and Answer Virtual Meeting
Nov. 18, 2024, 11:30a.m.-12:30 p.m.

Interested applicants are welcome to join an applicant's meeting to ask questions. This is a virtual meeting that will be open to any interested parties. It is not required to respond to the application. Final answers to questions posed during the virtual meeting will be given in writing and posted on the IDOH Early Detection website:

[https://www.in.gov/health/cdpc/cancer/early-detection/.](https://www.in.gov/health/cdpc/cancer/early-detection/)

To join the Teams meeting, click [here](#) or use the information below.

- Meeting ID: 236 601 805 114
- Passcode: uLSo6h

Dial in by phone

317-552-1674

Phone conference ID: 632 896 28#

Join on a video conferencing device

- Tenant key: indiana@m.webex.com
- Video ID: 111 625 116 4



Final Reminder:

Final Applications are due by COB on Jan. 31, 2025 via email or other electronic means. It is the responsibility of the grantee to include all sections of the proposal.

