

Infectious Disease Bureau
Ryan White Services Division



Request For Proposal
Ryan White Services Division Consultant

November 19, 2018

RFP Timeline

Monday, November 19, 2018	RFP available online at www.bphc.org/RFP by 12:00 PM
Friday, November 23, 2018	Questions are due in writing by 12:00 PM to: Jenifer Leaf Jaeger, MD, MPH Director, Infectious Disease Bureau Boston Public Health Commission JJaeger@bphc.org Subject: Ryan White Services Division Consultant
Monday, November 26, 2018	Responses to questions available for viewing on www.bphc.org/RFP by 5:00 PM
Monday, December 3, 2018	Proposal due by 5:00 PM to Jenifer Jaeger, JJaeger@bphc.org .
Friday, December 7, 2018	Notification of Decision The desired date for notification of award to the proposer, BPHC has the discretion to extend this date without notice. The contract(s) results from this RFP shall be in effect when all necessary contract documentation is fully executed by BPHC and awarded vendor(s).

Overview

The Boston Public Health Commission (BPHC) is the local public health department for the city of Boston. BPHC's mission is to protect, preserve, and promote the health and well-being of all Boston residents, particularly the most vulnerable populations. BPHC's more than 40 programs are grouped into six Bureaus, which are supported by administrative and other support offices (Public Health Services Centers).

The Ryan White Treatment Extension Act provides direct financial assistance to Eligible Metropolitan Areas (EMA) most severely impacted by the HIV epidemic. Funding is intended to develop or enhance access to a comprehensive continuum of high quality, community-based care for low-income people living with HIV (PLWH) to achieve and maintain viral suppression. Comprehensive HIV care must include access to antiretrovirals and other drug therapies, substance abuse treatment, mental health treatment, and oral health. The HIV Care Continuum (HCC) must also include support services that enable individuals to connect to and remain in primary medical and HIV-specific care, as well as services that promote health and enhance quality of life for PLWH.

The BPHC has a long-established mission to invest in and contribute to efforts in our communities that promote health equity. This vision is exemplified in the administration of the Part A grant in the Boston EMA, established in 1990 at the time the Ryan White Comprehensive AIDS Resources Emergency Act (CARE Act) was initially enacted, and is comprised of 7 counties in MA and three in New Hampshire spanning an area of approximately 6,500 square miles with an estimated total population of 6.6 million (2016 census data). As of December 31, 2017, there were approximately 18,000 PLWH in the Boston EMA, representing a 10% increase in total prevalence since 2013. Approximately 95% of prevalent cases reside in the 7 Massachusetts EMA counties, of which 38% (nearly 5,000 PLWH) live in Suffolk County.

To ensure Ryan White Part A Services are aligned with the needs of persons disproportionately affected by HIV, the Ryan White Services Division (RWSD), in collaboration with the Ryan White Planning Council, conducts yearly Community Needs Assessments and collects stakeholder feedback to identify gaps in service delivery and detect emerging needs in the community. Analysis of client level data submitted electronically by all agencies, demonstrates that the greatest disparities in health outcomes, evident across the HCC, persist among persons who are Black or Hispanic/Latinx.

Data collected across MA and NH demonstrate that after five years of decreasing incidence rates of HIV, rates of new HIV diagnoses are increasing again and appears directly related to injection drug use (IDU), particularly the escalating presence of fentanyl. The proportion of HIV cases reporting IDU as a risk factor has roughly quadrupled from 2015 to 2017 (4% to 15%). In addition to persons who inject drugs, emerging high-risk populations include transgender and persons experiencing homelessness. A further recent development is Massachusetts' Medicaid waiver allowing the restructuring of MassHealth's Accountable Care Organization (ACO) program as of January 2018 designed to provide integrated health care for over 900,000 MassHealth members. BPHC will need to determine the long-term impact of this change concerning the HRSA requirement that Ryan White must be the payor of last resort.

Scope of Service

The BPHC is seeking a consultant to support the RWSD in the Infectious Disease Bureau (IDB) who is knowledgeable in HRSA requirements and restrictions to support the day-to-day administration of the Ryan White Part A Program while a new Division Director is hired. The IDB is one of six Bureaus within BPHC composed of 3 major Divisions: Ryan White Services, Education and Community Engagement, and Communicable Disease Control. The RWSD has a total staff complement of 11 and manages the largest single grant within BPHC.

While the IDB Bureau Director is actively recruiting to fill the Division Director vacancy, the consultant will support the overall administrative activities required by HRSA which encompasses managing project workflows and providing programmatic direction. This will provide needed support while current Division staff on-board and train recent new hires. Additionally, the consultant will advise on strategies for maintaining and promoting the sustainability of the Ryan White Part A grant in the context of the changing HIV epidemiology and funding landscape.

Responsibilities shall include:

- **Contract Management:** with guidance from the IDB Bureau Director and support from division staff, oversee the distribution of approximately \$15 million dollars in HRSA grant funds according to the priorities established by the RW Planning Council and in accordance with BPHC policies.
- **Agency Monitoring:** with guidance from the IDB Bureau Director and support from division staff, support the Agency Monitoring unit to provide on-site review of all funded agencies to ensure proper implementation of Part A services, including compliance with HRSA eligibility guidelines and Standards of Care.
- **Programmatic coordination and compliance:** work with the IDB Bureau Director and division staff to ensure compliance with all HRSA and BPHC reporting requirements and implementation of performance indicators and outcome measures. Assist in the FY19 RFP process including external and internal review of applications.
- **Strategic Guidance:** consult and advise on impact of HRSA funding changes and impact of Massachusetts Accountable Care Organization and systems reform that are impacting programmatic coverage RE: flexible services (e.g., housing/residential care, medical nutrition) to maximize utilization of HRSA funding to meet community needs and address service gaps.

Qualifications

Respondent must meet the following requirements:

- Lead staff must have demonstrated experience in working with HRSA and grantees on Ryan White funded activities.
- Lead staff must have demonstrated experience consulting state and/or local health departments on Ryan White implementation activities, particularly on supporting efforts around compliance and quality improvement/quality assurance activities.
- Consultant must have experience in working with organizations that have adapted programmatic activities to leverage resources from health systems transformation/payment reform changes at the state or local levels.
- Demonstrated ability to work collaboratively with a diverse group of stakeholders.
- Project management experience and ability to meet major milestones and deliverables on time.
- Strong written and oral communication skills.

Period of Performance

The anticipated start date of services shall be performed on or about December 10, 2018 through February 28, 2019.

Budget

The budget for the performance of service as described herein must not exceed a total of \$48,000.000. Awarded contract will be determined based on project proposal and duration.

Proposal Requirements

Proposal must consist of the following:

1. Justification addressing qualifications and proposals for approaches to the work.
2. Resume(s) for all proposed personnel for the project.
3. Detailed budget for period of performance must include costs specific to activities and deliverables within the scope of service including: hourly rate, travel, and other related expenses.
4. Hours of Service shall be between 9:00 AM – 5:00 PM Monday through Friday (hours may vary)
5. A report, workplan, or other example of relevant work conducted by the respondent
6. Format must be in Times New Roman, 1.5-line spacing, 12-point font, not to exceed 8 pages.

Submission

Respondents must submit proposal to:

Jenifer Leaf Jaeger, MD, MPH

Director, Infectious Disease Bureau, Boston Public Health Commission

JJaege@bphc.org

Proposals must be received no later than 5:00 PM, Monday, December 3, 2018.