

**STATE OF TENNESSEE  
DEPARTMENT OF HEALTH**

**REQUEST FOR APPLICATION**

**FOR**

**INCREASE DIABETIC RETINOPATHY AND CHRONIC KIDNEY DISEASE  
SCREENING IN HEALTHCARE ORGANIZATIONS**

**RFA # 34347-93124**

## REQUEST FOR APPLICATION

### STATE OF TENNESSEE

### DEPARTMENT OF HEALTH

#### I. Introduction:

Did you know that one in ten people in the United States is living with diabetes? In Tennessee, more than 769,000 (14.0%) adults have been diagnosed with diabetes, and over 537,000 (9.9%) adults have reported being told by their provider that they have/had prediabetes. To address staggering diabetes data, the Centers for Disease Control and Prevention (CDC), Division of Diabetes Translation awarded the State a five-year Cooperative Agreement (CA) to implement strategies to decrease the risk for type 2 diabetes among adults with prediabetes, improve self-care practices, enhance quality of care, and increase early detection of complications among people with diabetes. All work supported under the CA will focus on reducing health disparities for priority populations, defined as those who have systematically experienced greater obstacles to health.

To support the implementation of activities/strategies, the State is seeking applications to deliver sustainable strategies to prevent diabetes complications through screening and early detection of Diabetic Retinopathy (DR) and Chronic Kidney Disease (CKD) in healthcare organizations (HCO). DR and CKD are two microvascular complications frequently identified in type 2 diabetic patients. DR is the leading cause of preventable blindness and is a result of the growth of abnormal blood vessels in the retina. CKD is a condition in which the kidneys are damaged and cannot filter blood efficiently, leaving excess fluid and waste from the blood in the body which may cause other health problems, such as heart disease and stroke. Both complications require screening at the time of type 2 diagnosis and annually thereafter.

Applicants must demonstrate the capacity to:

- Develop and implement a work plan to increase screening for DR and CKD within their HCO.
- Establish/expand multimodal partnerships to develop referral plans for screen-positive DR patients and patients with elevated CKD findings. Referral plans should address diagnosis, intervention/treatment, and follow-up/surveillance.
- Establish baseline data and target goals to increase the number and percent of patients with diabetes who have received DR and CKD screening.
- Develop and implement an evaluation plan to track, validate, and report pertinent data.

- Improve the adoption of industry-standard, International Classification of Diseases, Tenth Revision/ ICD-10), social determinant of health (SDOH) codes (Z codes) available for financial reimbursement.

Suggested reference resources include, but are not limited to:

- Healthy People 2030:
  - Reduce vision loss from DR – V-04
  - Increase the proportion of adults with diabetes who have a yearly eye exam – D-04
  - Increase the proportion of adults with CKD who know they have it – CKD-02
- Innovator Highlight: A Telemedicine Approach to Increasing Diabetic Retinopathy Screening
- Innovator Highlight: Increasing Diabetic Retinopathy Screening by Training Primary Care Providers
- CDC: Diabetes and Chronic Kidney Disease
- CDC: Diabetes and Vision Loss

Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.

Funds may not be used for the following:

- Research;
- clinical care except as allowed by law;
- to purchase furniture or equipment;
- Reimbursement of pre-award costs;
- publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body; and
- the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

The State is seeking applications to provide the services outlined in this RFA. The State will offer multiple grant(s) for a total of \$ 200,000.00. The project period is expected to begin on August 1, 2024 and will last for eleven (11) months.

## II. APPLICATIONS:

To respond to this Request for Application, please complete the **Application and Competitive Requirements**. See also IRS Form W9 and State of Tennessee, Department of Finance and Administration Automated Clearing House (ACH) Credits

and Instructions for completion. The **Application** contains detailed questions about your organization’s background and the specifics of your proposed project.

**Attachment 3** is the Grant Budget. This section shall contain all information relating to cost, based on a line-item budget. Complete the Grant Budget form and the attached Line-Item Details form. A description of how dollars will be used must be provided for each line item completed with a superscript 2 on the end, as applicable for the Budget form.

Note: Each expense object line-item is defined by the *U.S. OMB’s Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Subpart E Cost Principles* (posted on the Internet at: <https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-E>) and CPO Policy 2013-007 (posted online at <https://www.tn.gov/generalservices/procurement/central-procurement-office--cpo-/library-.html>).

Given the limited amount of available funding and the nature of these applications, priority will be given to applications that minimize indirect costs.

### III. Schedule of Events

The following is the anticipated schedule for awarding grants to **Increase Diabetic Retinopathy and Chronic Kidney Disease Screening in Healthcare Organizations**. The State reserves the right to adjust the schedule as it deems necessary.

<b>EVENT</b>	<b>TIME (Central Time)</b>	<b>DATE (all dates are state business days)</b>
1. RFA Issued		April 22, 2024
2. Pre-response Teleconference	9:00 a.m.	April 25, 2024
3. Written “Questions & Comments” Deadline	2:00 p.m.	April 29, 2024
4. State Response to Written “Questions & Comments”		May 3, 2024
5. Deadline for Applications	2:00 p.m.	May 10, 2024
6. Evaluation Notice Released		May 24, 2024
7. Effective Start Date of Contract		August 1, 2024

### **Pre-response Teleconference:**

A Pre-response Teleconference will be held at the time and date detailed in the RFA Schedule of Events to answer questions concerning the funding opportunity. The information for the Pre-response Teleconference is as follows:

Meeting Name: RFA #34347-93124 Teleconference

Meeting number (access code): 2317 125 8611

Meeting password: yMmVF9kK3h4

Meeting Link:

<https://tn.webex.com/tn/j.php?MTID=med9a9ac8e4f5a2325d04ce29ec5e138d>

Join by phone: +1-415-655-0001 US TOLL

Any applicant desiring to submit an application in response to this RFA is encouraged to have at least one (1) representative on the teleconference, however attendance is not mandatory. If you cannot participate, please direct your questions by the scheduled deadline as indicated above, to Melissa Painter, Competitive Procurement Coordinator, listed below in Section IV.

### **Questions and Answers:**

All questions concerning this RFA must be presented to the Competitive Procurement Coordinator shown in Section IV., in writing, on or before the Deadline for Written Questions and Comments as detailed above in the Schedule of Events. Questions may be emailed to the Competitive Procurement Coordinator. The State's responses will be emailed and posted as an Amendment to the following website:

<https://www.tn.gov/health/funding-opportunities.html>.

**Deadlines stated above are critical.** If documents are submitted late, they will be deemed to be late and cannot be accepted. The clock-in time will be determined by the time of the online submission. No other clock or watch will have any bearing on the time of application receipt.

Each applicant shall assume the risk of the method of dispatching any communication or application to the State. The State assumes no responsibility for delays or delivery failures resulting from the method of dispatch.

## **IV. Submission of APPLICATIONS:**

Please submit the completed application with all attachments by online submission via the following link no later than the deadline specified in Section III, Schedule of Events in the form and detail specified in this RFA.

Web Link: <https://www.tn.gov/health/funding-opportunities.html>

The Competitive Procurement Coordinator at the address shown is the sole point of contact for this competitive process. **The APPLICATION and all attachments must use 12-point font.**

Melissa Painter  
Competitive Procurement Coordinator  
Service Procurement Program  
Division of Administrative Services  
Andrew Johnson Tower, 5<sup>th</sup> Floor  
710 James Robertson Parkway  
Nashville, TN 37243  
Phone: (615) 741-0285  
Fax: (615) 741-3840  
Email: Competitive.Health@tn.gov

Checklist for Submission of Applications:

- Application (**Attachment 1**) (Expand up to max of 8 pages if needed)
- Competitive Requirements
- Letters of Commitment from Participating Partners
- Budget Form (**Attachment 3**)
- State of Tennessee, Department of Finance and Administration Automated Clearing House (ACH) Credits and Instructions (**Mailed per instructions on form.**)
- Form W-9, Request for Taxpayer Identification Number (TIN) and Certification (**Mailed with ACH form.**)

## V. Application Evaluation:

An evaluation committee made up of at least three (3) representatives of the Department of Health will be established to judge the merit of eligible applications.

- A. The committee shall review applications on the basis of the information requested in the RFA. Applications will be evaluated based on the following criteria:
- Work plan is complete and achievable, meeting all objectives of the scope of services
  - The project addresses priority populations most impacted by diabetes.
  - Collaboration and support from relevant partners.
  - Data collection and evaluation methods are specific and measurable.
  - Proposed expenses are realistic and cost effective.
  - Past experience with similar projects and experience of key project personnel.

The committee will evaluate and recommend for selection to the Commissioner of the Department of Health, the applications which are most responsive to the State's needs.

- B. Any application that is incomplete or contains significant inconsistencies or inaccuracies shall be rejected. The State reserves the right to waive minor variances or reject any or all applications. The State reserves the right to request clarifications from all applicants.

## VI. Sample Grant Contract:

Following the State's evaluation, grant contracts will be prepared as shown in the **Sample Grant Contract**.

It is imperative that each applicant review the entire Sample Contract with their legal counsel prior to submitting an application for the Increase Diabetic Retinopathy and Chronic Kidney Disease Screening in Healthcare Organizations grant award and notify the State *in advance* if it cannot accept any terms or conditions. Please submit any exceptions to contract language with the Application for Increase Diabetic Retinopathy and Chronic Kidney Disease Screening in Healthcare Organizations. **Taking any exceptions to State contract language may result in the Application being deemed non-responsive and rejected. Any later requests for contract changes will not be considered.**