Telehealth in MCH Public Health Systems

Webinar will begin at 2 PM ET.
Agenda

• Welcome
• Project Overview
• Request for Proposals
• Q & A

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Welcome

The Association of Maternal & Child Health Programs leads and supports programs nationally to protect and promote the optimal health of women, children, youth, families, and communities.
Project Overview

• CARES Act grant to support telehealth use in maternal & child health public health systems
• AMCHP & partners will provide technical assistance and direct awards to state & territorial agencies
• HRSA–defined focus areas within MCH
• Environmental scan completed to shape project
Focus Areas

Title V & CYSHCN
Children & Youth with Special Health Care Needs

MIECHV
Maternal, Infant, & Early Childhood Home Visiting

Newborn Screening
• EHDI
  Early Hearing Detection & Intervention
• NBS & CCHD
  Newborn Bloodspot Screening; Critical Congenital Heart Disease Screening
Priorities

- Improving the family’s experience
- Increasing health equity
- Expanding access to services
- Collaboration across systems
- Full family engagement
- Innovation in telehealth use
Expert Partners

Telehealth
• CCHP & TRCs
Lived Experience
• Parent to Parent USA
Public Health Agencies
• ASTHO & NACCHO

Home Visiting
• Rapid Response & ASTHVI
EHDI
• NCHAM & Hands & Voices
NBS & CCHD
• APHL & Genetic Alliance
Eligibility

Jurisdictions that Receive Title V Funds

• 50 US States
• District of Columbia
• Puerto Rico & US Virgin Islands
• Guam, American Samoa, & Northern Mariana Islands
• Palau, Marshall Islands, & Federated States of Micronesia
Eligibility

**Title V & CYSHCN**
- HRSA-funded agencies

**MIECHV**
- HRSA-funded agencies, *including tribal grantees*

**NBS & CCHD**
- Agencies that directly manage laboratory and/or follow-up services

**EHDI**
- HRSA-funded agencies
Grants

- One proposal per jurisdiction
- Up to $100,000 per award
- One or more focus areas

Funds Available: $1.83 Million
- Title V & CYSHCN: $1.2 Million
- Newborn Screening: $460,000
- MIECHV: $150,000
Single Proposal

- Encourage systems building & collaboration
- Support for jurisdictions in developing a single proposal as needed
- Funds may be spread across agencies within a jurisdiction
Exceptions

• MIECHV-funded tribal nations are encouraged to apply independently

• Multi-jurisdiction collaborations will be considered (i.e. RGNs)
  • Proposals may total > $100,000, but limit for jurisdictions remain

• Jurisdictions receiving awards may sub-grant funds to partners, community agencies, etc.
Proposal Process

1. Review RFP, FAQ, application at amchptelehealth.org.
2. Engage family experts & other focus areas.
3. Letter of Interest: Required of all potential applicants. **Due September 1**
4. Apply: Two distinct application cycles; up to half of funds will be awarded in the first cycle.
Key Dates

Cycle I
Sept 1: Letter of Interest
Sept 15: Proposal Due
Sept 30: Awards Announced

Cycle II
Sept 1: Letter of Interest
Oct 16: Proposal Due
Oct 30: Awards Announced

All Awards
April 30: Work Complete
Letters of Interest

Due Tuesday, September 1

- On letterhead
- Expected Cycle I or II
- Focus area(s)
- Known barriers to RFP or contracting process
- Family engagement partner(s)
- Request for TA in strengthening application, if desired
- Email to: telehealth@amchp.org

Letter of interest is non-binding
Proposal TA

AMCHP will offer TA to applicants

- When requested (by Oct 1)
- If more than one Letter of Interest is received from a jurisdiction
- If family experts are not engaged
- To Cycle I proposals that are not funded

AMCHP aims to fund the most innovative proposals that will benefit the communities with the greatest need.

All eligible jurisdictions are urged to apply. AMCHP will work with programs to resolve barriers in applying, contracting, receiving funds, purchasing, etc.
Family Experts

- Participation of family experts is essential to success
- Minimum: letter of support with application
- Encourage full collaboration and partnership
- Family experts may be individuals or organizations, including Parent to Parent, Family Voices and F2Fs, etc.
Proposal Scoring

• All proposals will be scored by AMCHP and its partners using the rubric in the RFP
• Reviewers will each use their own ‘lens’ to determine their scores
• Overall scores will be averaged

Expert Reviewers
• Family Experience
• Telehealth
• Equity
• Innovation
• Policy
Proposal Scoring

- Proposals will be scored by experts in each focus area for which they apply
- Scores will be averaged with the overall score, and looked at independently
- Projects may be partially funded by focus area

Expert Reviewers
- Title V & CYSCHN: AMCHP Program Staff
- MIECHV: Rapid Response & ASTHVI
- EHDI: NCHAM & Hands & Voices
- NBS & CCHD: APHL & Genetic Alliance
Proposal Scoring

• Focus-area specific scoring guidance will be posted to the project website on Sept 1
• Each proposal will have between 6 and 10 scores, and as many as 13 reviewers
• **Less is more:** Proposals and budgets should be broad and flexible, as needs and challenges evolve.
Questions

• Type into the chat box
• Email: telehealth@amchp.org
• Website: amchptelehealth.org
• Submit Letters of Interest by September 1