



REQUEST FOR PROPOSALS

October 24, 2017

Funding Opportunity for State-level Initiatives to Expand Access to Long-Acting Reversible Contraception

The National Institute for Reproductive Health (NIRH) is now accepting proposals from 501(c)(3) organizations to support state-level initiatives to expand access to long-acting reversible contraception (LARC).

About the LARC Access Project

NIRH firmly believes that all people should have access to the full range of contraceptive options in order to ensure they are able to select and access the method that is right for them, as well as be able to stop or change that method at any time. This goal is an important step towards ensuring that all people have the ability to choose if, when, and how to start and grow a family. Many challenges must be addressed before this vision can be fully realized. Access to LARCs, and to LARC removal, is one such challenge.

LARC access is often impacted by a range of administrative, regulatory, and/or systems level barriers. At the same time, great strides have been made in recent years by a range of local, state, and national stakeholders that address those barriers. NIRH seeks to continue to contribute to this important work by partnering with organizations on the ground in support of initiatives to address these challenges, even as we acknowledge that the recent change in the federal administration may affect how and where progress can be made.

About the National Institute for Reproductive Health

The National Institute for Reproductive Health (NIRH) builds power at the state and local level to change public policy, galvanize public support, and normalize women's decisions about abortion and contraception. Using a partnership model, we provide state and local advocates with strategic guidance, hands-on support, and funding to create national change from the ground up. We are a force multiplier – we form strategic partnerships with a wide range of organizations to directly impact the reproductive health and lives of women across the country. Since 2008, NIRH has provided direct grants and hands-on support to more than 145 reproductive health, rights, and justice organizations in 37 states and 50 localities across the country.

At the national level, NIRH engages in groundbreaking public opinion research, proactive policy initiatives, and innovative advocacy campaigns to shape a new national conversation about reproductive freedom.

About NIRH's Partnership Model

NIRH is a national advocacy organization, not a foundation; we work in close partnership with organizations on their funded initiatives in order to learn from those working directly on the ground, offer our expertise and resources, and share emerging best practices with the field. To that end, NIRH may ask partners to participate in webinars or present at conferences. NIRH may also convene partners on calls with each other to facilitate collaboration and learning across cities and states.

Supporting State-level Initiatives to Expand Access to LARC

Proposals are now being accepted to support state-level initiatives to expand access to LARCs in the areas of work described below. **Funding awarded for each initiative will be a maximum of \$50,000 per organization, within the range of \$30,000 – \$50,000. NIRH will also consider collaborative projects including multiple organizations, with a total possible funding award of \$90,000. The funding cycle is January 1, 2018 to December 31, 2018.**

Proposals can fall into one of three categories:

- Implementation of a pilot program to evaluate the feasibility of offering peri-abortion implants in the state, or a pilot program of similarly innovative models of LARC service delivery
- Initiative to address barriers to LARC provision at federally qualified health centers (FQHCs)
- Initiative to address a systems, administrative, or regulatory barrier to LARC access in a state

Piloting Innovative LARC Service Delivery

Provision of contraceptive implants in the same visit during medical abortion protocols reduces the number of visits a patient is required to make to obtain LARC if that is their chosen method. In 2017, NIRH supported Planned Parenthood League of Massachusetts in a pilot to offer peri-abortion implants to patients at their clinic in Boston, and created a case study based on the success of the project. NIRH is seeking partnerships to replicate this pilot to determine feasibility of providing this service in other states, and to draw upon new partners' experiences to expand upon the existing case study, creating a stronger model for the field. Proposals in this funding stream should demonstrate the clinic's level of readiness to offer this service and expectations for success, as well as anticipated challenges. Potential applicants should contact Winnie Ye at wye@nirhealth.org to receive a draft copy of the case study as a reference.

NIRH is also interested in proposals to pilot other innovative models of LARC service delivery. Proposals should include information demonstrating that the proposed mechanism does not decrease effectiveness of the LARC device, if necessary, and explain why the model is innovative and what its impact would be if proven effective.

Note: A portion of the funding in this stream only may be used to cover the cost of devices if reimbursement is one of the challenges the proposal seeks to address.

Addressing a Barrier to LARC in Federally Qualified Health Centers

For many people who seek family planning care from federally qualified health centers (FQHCs), access to LARC may be hindered by Medicaid coverage provisions that do not support comprehensive outpatient reimbursement for all of the costs associated with LARC, including insertion, removal, education, and counseling, and the device itself. Addressing the challenges that FQHCs face in providing LARC is of particular importance because of the large number of people of childbearing age who seek care from them. In partnership with Health Management Associates (HMA), NIRH supported a policy change to remove such barriers in New York State and developed a toolkit from the experience, *Enhancing Long-Acting Reversible Contraception (LARC) Uptake and Reimbursement at Federally Qualified Health Centers: A Toolkit for States*, available [here](#). NIRH is seeking partnerships that will use the toolkit or employ other strategies to address barriers to LARC access in FQHCs.

Addressing Systems, Administrative, or Regulatory Barriers to LARC Access in a State

LARCs are subject to a range of unique barriers that often make them difficult or impossible to access for institutions, providers, and/or patients. Such barriers include but are not limited to: lack of comprehensive coverage from all payors, nonexistent or inadequate reimbursement for all costs associated with LARC, nonexistent or inadequate provider training, the high cost and challenging logistics of advance stocking and service delivery, and misinformation or a lack of education about LARC on the part of patients, providers, and/or financial staff. These barriers may impact LARC insertion overall, or be a particular challenge of specific procedures such as postpartum or post-abortion LARC insertion; similarly, they may affect all institutions or only certain types of clinics or providers. In the past year, NIRH supported work to address barriers to immediate postpartum LARC access, insufficient reimbursement rates, and systems-level challenges to offering LARC in large hospital networks. NIRH is once again seeking partnerships that will address barriers to LARC access and uptake on an administrative, regulatory, or systems level, and is particularly interested in initiatives related to post-abortion LARC.

Writing a Successful Proposal

While NIRH understands and anticipate that unexpected challenges may cause delays or hinder success, all proposed initiatives should have the possibility of being successfully implemented or completed by the end of 2018.

NIRH cannot fund legislative advocacy as part of this project. However, if your proposal includes or would benefit from a legislative component, this may be implemented alongside the initiatives included in the proposal. Please indicate that this will be an aspect of your strategy in the proposal and note the separate source of these legislative lobbying funds in the total project budget.

NIRH strongly encourages individual proposals from reproductive justice organizations, and collaborative proposals that include a reproductive justice organization, or an organization with experience addressing reproductive coercion, as an equal partner.

Potential applicants are strongly encouraged to discuss their proposals with NIRH staff in advance of submission. To set up a call, please contact Winnie Ye at wye@nirhealth.org

PROPOSAL GUIDELINES

Proposals should be no more than seven pages, excluding coversheet and budget, and include the following.

- Completed Coversheet (available [here](#))
- Executive Summary (no more than half a page)
 - Provide a brief summary of the initiative, including a description of the policy being pursued and the need or problem it addresses, and its key goals.
- Organizational Background (no more than a page)
 - Brief summary of the organization, its mission and activities, and constituencies served
 - Please include information on how your thinking about racial equity and reproductive coercion informs how you develop and implement programs.
 - Description of key staff, indicating their role with funding management and/or implementation of the initiative
 - Brief summary of how this initiative fits into organizational priorities and mission
- Description and Goals of Initiative
 - Description of the proposed initiative's goals and interim objectives, including benchmarks for progress and likelihood of success by the end of 2018.
 - Describe the barrier the initiative seeks to address and its current impact on LARC access in the state, and anticipated impact of overcoming this barrier on access to LARCs, as well as access to the full spectrum of contraceptive access.
 - Describe how strategies in the initiative will guard against coercion, incorporate LARC removal into training and policy work, and/or advance efforts to increase access to the full spectrum of contraception, as appropriate.
 - Additionally, address the following:
 - Who has the power to help the organization achieve the initiative's goal(s)?
 - Who are your organization's closest allies in achieving the initiative goals, if any? Please describe the nature of these relationships and existing buy-in from these and other partners for this initiative.
 - Who are the key stakeholders you will need to build relationships with to achieve your goals? What steps do you foresee as necessary to build those relationships? What challenges do you anticipate?
 - Demonstrated support of elected officials and/or administrative agencies for work on this initiative, if appropriate, or plans for developing that support. *Letters of support are welcome, but not required.*
- Initiative Timeline (no more than a page)
 - Outline an anticipated timeline for the initiative that includes the key goals during this funding period.
- Anticipated Strategic Guidance and Technical Support Needs and Timeline
 - Provide a brief summary of all anticipated technical assistance needs and at what steps of the funding cycle they will be needed (see Strategic Guidance and Technical Support Menu at the end of this document).

- Proposed Budget, including a budget narrative detailing how funds would be used. If more than one organization is submitting a proposal, explain how the total funding amount will be allocated between organizations. The maximum amount awarded will be \$50,000 for single organization led projects and \$90,000 for collaborative state projects; determination of the final award will be based on the resources needed to complete the proposed activities. Possible budget lines could include staff time, support for meetings, materials creation, or technical costs (e.g., website).
 - *Please note that indirect costs should not exceed 15 % of your initiative’s budget and that the funding awarded should not be the exclusive source of funding for any staff person.*

SELECTION PROCESS AND DEADLINES

- 1. Distribution of Request for Proposal:** The Request for Proposal will be distributed on October 24, 2017.
- 2. RFP Webinar:** NIRH will host a webinar on November 2, 2017 at 1:00 pm EDT to discuss the RFP, provide guidance on what a successful proposal could look like, and answer any questions. Register [here](#).
- 3. Proposal Feedback:** Organizations with individual questions about their proposals or proposal ideas, and particularly those organizations who have not partnered with NIRH previously, are strongly encouraged to set up a time to review their ideas with NIRH staff by setting up a call at <https://calendly.com/jmistry/nirhrfp2018>.
- 4. Final Proposal Submitted:** Final proposals should be sent via email to Winne Ye at wye@nirhealth.org with “LARC RFP 2018” in the subject line and are due no later than 5:00 pm EST on November 20, 2017. Proposals will not be accepted after the deadline.
- 5. Proposal Review and Follow-Up:** Proposals will be reviewed by NIRH staff. Additional information or clarification of the proposal may be requested of applicants following the initial review.
- 6. Announcement of Funding Decisions:** Applicants will be informed of funding decisions on a rolling basis; all applicants will be notified of final decisions by December 15, 2017.
- 7. MOU Signed:** NIRH will outline goals and expectations with partners in a Memorandum of Understanding (MOU). All MOUs should be signed by January 19, 2018. Funding will be disbursed to partners upon receipt of the signed MOU.

Strategic Guidance and Technical Support Menu

NIRH can provide the following technical assistance. This list is not exhaustive, and NIRH is also able to connect partners with organizations or individuals that can provide support not available in-house.

Strategy Support & Campaign Planning

- Development and implementation of strategies to achieve initiative's objectives
- Guidance in responding to obstacles or opportunities as they arise
- Development and implementation of campaign strategy
- Development and implementation of strategies that engage grassroots and grassroots power
- Identification of other movement resources and opportunities to advance objectives

Policy Support

- Legal research and analysis of existing and proposed legislation or administrative action
- Development and drafting of proactive legislation, regulations, amendments, and policy briefs
- Development of talking points and testimony
- Preparation of lawmaker-friendly resources and talking points
- Connections with national policy resources
- Connections with other state and local groups working to develop similar proactive policies

Communications

- Development and implementation of communications/media plans
- Creation of messaging strategy, including message development and research
- Communications and messaging training for advocates and activists
- Support with media relations, including press strategy, media pitches, and access to a national database of reporters
- Assistance with social media, including development of social media campaigns, drafting of sample posts, and support for graphics creation
- Development and writing of issue briefs
- Development of websites and microsites

Field Operations

- Development and implementation of field operations, including supporter identification and data analytics
- Engagement in volunteer management and leadership development
- Support with understanding and use of voter file systems

Coalition Building

- Support with coalition formation/planning and governance, including sample coalition documents (e.g. commitment letters, MOUs, membership roles)
- Engaging non-traditional partners and managing coalition dynamics
- Planning and facilitation of coalition meetings