

OVERVIEW INFORMATION

Issuing Agency: Health Policy Commission

Funding Opportunity Title: Birth Equity and Support through the Inclusion of Doula Expertise (BESIDE)

Announcement Draft: Version 1, Posted June 10, 2021

Funding Opportunity Number: HPC-BESIDE-2021-001

Authority: Chapter 41 of the Acts of 2019 (Section 88)

KEY DATES

Date of Issue: June 10, 2021

Information Session: June 29, 2021

Proposal Due Date: August 5, 2021 by 3:00 pm Eastern

Anticipated Awardee Announcements: September 15, 2021

Anticipated Contract Execution: November 1, 2021

Anticipated Period of Performance: 24 months

Table of Contents

Table of Contents	2
Definitions	3
Section I: Background	5
Section II: Purpose	5
Section IV: Funding Opportunity Description	7
Section V: Measurement and Reporting.....	8
Section VI. Award Information.....	9
A. Anticipated Timeline.....	9
B. Funding Disbursement.....	9
C. Termination or Amendment of Awards.....	10
Section VII. Proposal Instructions	10
A. General Proposal Requirements.....	10
B. Cover Letter Instructions	11
C. Operational Response Instructions.....	11
Section VIII. Proposal Review, Selection & Award Process.....	12
A. General Provisions	12
B. Contact of Eligible Entities and any Subcontractors with Health Policy Commission	12
C. Information Session and Questions	12
D. Review and Selection Process	13
E. Selection Criteria	14
Section IX. Additional Terms and Details	16
A. Responsibilities of Eligible Entities.....	16
B. General Requirements	16
C. Contract Documents	18
Section X. Appendix	18

Definitions

The following terms appearing capitalized throughout this Request for Proposals (RFP) and its Attachments have the following meanings, unless the context clearly indicates otherwise.

Applicant: An Eligible Entity submitting a Proposal for funding in response to this HPC-issued RFP. This is the entity with whom the HPC will enter into a Contract if awarded funding.

Attachment: Any document or exhibit referenced as attached to this RFP.

Award: Any funds, grant, or investment awarded pursuant to this RFP.

Award Manager: The primary point of contact for the HPC who will assume responsibility for overall Award management under the Contract.

Award Plan: The plan for execution of the Program developed by the Awardee prior to the beginning of the Period of Performance, in a form specified by the HPC. Subject to review by the HPC, the Award Plan is the primary basis for Award contracting, accountability, and payment.

Awardee: Any Applicant that submits a response to this RFP, is awarded funds, and enters into a Contract with the HPC as a result of this RFP.

Birth Center: A home-like facility where births are planned to occur following normal, uncomplicated pregnancy. A birth center has sufficient space to accommodate participating family members and support people of the women's choice. A Birth Center provides professional midwifery practice to childbearing women during pregnancy, birth, and puerperium and to the infant during the immediate newborn period by nurse-midwives or by an obstetrician or family practitioner with obstetrical privileges in a nearby hospital licensed in Massachusetts or operated by the Commonwealth. A Birth Center has specified access to acute care obstetric and newborn services.

Birthing Hospital: An Acute Hospital licensed to provide Maternal and Newborn Services under M.G.L. c. 111, §51 and 105 CMR 130.000 by the Massachusetts Department of Public Health (MDPH).

Black Birthing Person/People¹: People with African ancestral origins, including cis-women, trans-men, and non-binary people, who give birth. According to the U.S. Census definition of the race “Black,” this includes all individuals who identify with one or more nationalities or ethnic groups originating in any of the black racial groups of Africa. Examples of these groups include, but are not limited to, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, Dominican, Cape Verdean, and Brazilian.

Board: The governing board of the Health Policy Commission, established in M.G.L. c. 6D, §2(b).

Commissioner: A member of the governing Board of the Health Policy Commission pursuant to M.G.L. c. 6D, § 2(b).

¹ Some pregnant and postpartum individuals do not identify as “women” or “mothers.” By using the phrase “Black Birthing People” in lieu of more traditional terms used to describe this population, the HPC aims to be inclusive of all Black pregnant and postpartum individuals, regardless of gender identity. In instances where this document references research or other external sources, the HPC defers to the authors’ original terminology (e.g., women, mothers).

Contract: The legally binding agreement, including any amendment(s), between the HPC and an Awardee that results from this RFP.

Cultural Humility: Cultural humility is a process of reflection to gain a deeper understanding of cultural differences in order to improve the way populations facing structural inequities are treated and researched. Cultural humility does not focus on competence or confidence and recognizes that the more you are exposed to cultures different from your own, the greater ability you have to realize how much you don't know about others.²

Doula: A trained professional who provides nonmedical care including, but not limited to, education and general support before, during, and after the birth of a child.

Doula Organization: An organization that provides training, certification and/or business/administrative services on behalf of individual Doulas.

Eligible Entity: A Massachusetts Birthing Hospital or a Massachusetts Birth Center.

Financial Designee: An individual employed by an Awardee who will be responsible for tracking all funds identified in the Budget Response and reporting expenditures as required by the HPC.

Implementation Period: A period of time during which the Awardee implements the Program, which begins immediately after the Planning Period and lasts for 21 months.

Measurement Plan: The plan for tracking and reporting on measurable outcomes that the Program is expected to achieve over the Implementation Period. Awardees will work with the HPC during the Planning Period to finalize the Measurement Plan, including the measures, data sources, and processes for collecting and reporting Program data.

Period of Performance: The 24-month period of time during which activities are conducted pursuant to an Award and Contract executed pursuant to this RFP.

Planning Period: A three-month period during which the Awardee will prepare to implement the Program prior to the start of the Implementation Period.

Program: The specific projects, activities, interventions, or approaches proposed by an Applicant.

Proposal: The document(s) submitted to the HPC by an Applicant for an Award in response to HPC-BESIDE-2021-001.

Request for Proposals (RFP): A Request for Proposals or RFP issued by the HPC.

²Yeager KA, Bauer-Wu S. Cultural humility: essential foundation for clinical researchers. *Appl Nurs Res.* 2013;26(4):251-256. doi:10.1016/j.apnr.2013.06.008

Section I: Background

The Massachusetts Health Policy Commission (HPC) was established in 2012 through the Commonwealth's landmark health care cost containment law, [Chapter 224](#): "An Act Improving the Quality of Health Care and Reducing Costs through Increased Transparency, Efficiency and Innovation." The HPC is an independent state agency that develops policy to reduce health care cost growth and improve the quality of patient care. The HPC's mission is to advance a more transparent, accountable, and equitable health care system through its independent policy leadership and innovative investment programs. The HPC's goal is better health and better care – at a lower cost – for all residents across the Commonwealth.

The agency's main responsibilities are led by HPC staff and overseen by an 11-member Board of Commissioners. Key activities include setting the health care cost growth benchmark; setting and monitoring provider and payer performance relative to the health care cost growth benchmark; creating standards for care delivery systems that advance an equitable health care system and are accountable to better meet patients' medical, behavioral, and social needs; analyzing the impact of health care market transactions on cost, quality, equity, and access; investing in community health care delivery and innovations; and safeguarding the rights of health insurance consumers and patients regarding coverage and care decisions by health plans and certain provider organizations.

This document is a Request for Proposals (RFP) for the Birth Equity and Support through the Inclusion of Doula Expertise (BESIDE) investment program opportunity to support Massachusetts Birthing Hospitals and Massachusetts Birth Centers (i.e., Eligible Entities) to offer Doula services to improve the care and patient experience of Black Birthing People during and after pregnancy.

Section II: Purpose

Pursuant to Section 88 of Chapter 41 of the Acts of 2019 the HPC has been charged with implementing a two-year pilot program to reduce pregnancy-related deaths and improve pregnancy outcomes by considering evidence-based practices from successful programs implemented nationally and internationally in the development of the program. Through consultation with the Massachusetts Department of Public Health and the Betsey Lehman Center, the HPC has identified significant inequities in maternal health outcomes for Black Birthing People as compared to birthing people of other races.

For Black, Indigenous, and Hispanic birthing people, research shows an increased risk of preterm births, delivery-related complications, and pregnancy-related deaths due to chronic stress, poor-quality care associated with racism and environment, and systemic barriers that impede access to reproductive health care.^{3,4} Black Birthing People are three to four times more likely to die from pregnancy-related causes than White birthing people.⁵ Current Massachusetts data on maternal mortality and severe maternal morbidity suggest that Massachusetts has a low pregnancy-related mortality ratio overall compared to other states,⁶ but inequities persist in maternal health outcomes based on race and ethnicity. Between 1998 and 2013, Black non-Hispanic women in Massachusetts had twice the rate of severe maternal

³ Patel D. The Doula Difference: State and Federal Bills Aim at Reducing Maternal Health Disparities through Doula Services [Internet]. National Health Law Program. 2019

⁴ Kozhimannil KB, Hardeman RR, Attanasio LB, Blauer-Peterson C, O'Brien M. Doula Care, Birth Outcomes, and Costs Among Medicaid Beneficiaries. *Am J Public Health*. 2013 Feb 14;103(4):e113–21.

⁵ Petersen EE, Davis NL, Goodman D, et al. Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. *MMWR Morb Mortal Wkly Rep* 2019;68:762–765.

⁶ America's Health Rankings analysis of CDC WONDER Online Database, Mortality files, United Health Foundation, AmericasHealthRankings.org, Accessed 2020.

morbidity, including blood transfusion, during delivery hospitalization (175 per 10,000 hospitalizations), as White non-Hispanic women (83 per 10,000 hospitalizations).⁷ Growing attention on this issue has led to new activities at the state level, including the Racial Inequities in Maternal Health Commission established by Chapter 348 of the Acts of 2020, which aims to investigate and report on causes of and solutions to these inequities.

Given the data surrounding racial inequities in maternal health outcomes, the HPC has chosen to focus the BESIDE investment program on the evidenced-based model of community-supported birth, specifically through the provision of Doula services for Black Birthing People. Community-supported birth, which provides pregnant people with patient-centered care, can lead to improved childbirth outcomes and cost-savings and combat inequities caused by racism, gender oppression, and obstetric violence.⁸ Doula care is one community-oriented strategy to reduce inequities in birth outcomes by providing birthing people with added support from the prenatal period through labor and delivery to the post-partum period, which can be particularly beneficial for people of color and people from low-income communities.⁹ Doulas provide physical, emotional, and informational support and act as advocates for their clients, providing “a sympathetic but informed ear for the choices that the birthing staff may ask [them] to make during the birthing process.”¹⁰ Doulas may help patients create birth plans, accompany patients to clinical care visits, and offer postpartum support with infant feeding and bonding. Doulas may also offer information and educational materials, emotional and physical support during prenatal and postpartum visits and labor and delivery, and connection to social services to address health-related social needs as they arise. This type of support with navigating the reproductive health care system is particularly valuable for populations that have faced historical biases, including Black women.¹¹ Doulas may pursue certification from one or more certifying organizations,¹² thereby gaining specific skills and knowledge to support patients.

Many studies have shown that doula-led care can reduce the impact of racism and maternal health inequities in people of color.¹³ One study showed lower cesarean and instrumental vaginal deliveries for doula-supported births among low-risk women delivering at term as compared to births that were not doula-supported.¹⁴ Other benefits of doula care can include fewer obstetric interventions, less use of pain medication, shorter labor, and higher breastfeeding rates. Research has also shown that doula care can curb costs by helping to de-medicalize childbirth.¹⁵

The purpose of the BESIDE investment program is to address inequities in maternal health outcomes and improve the care and patient experience of Black Birthing People by increasing access to and use of Doula services. Specifically, the BESIDE investment program aims to:

⁷ Massachusetts Department of Public Health. Massachusetts State Health Assessment. Boston, MA; October 2017.

⁸ Bey A, Brill A, Porchia-Albert C, Gradilla M, Strauss N. Advancing Birth Justice: Community-Based Doula Models as a Standard of Care for Ending Racial Disparities. Ancient Song Doula Services, Village Birth International, and Every Mother Counts. 2019 Mar 25;33.

⁹ Bey A, Brill A, Porchia-Albert C, Gradilla M, Strauss N. Advancing Birth Justice: Community-Based Doula Models as a Standard of Care for Ending Racial Disparities. Ancient Song Doula Services, Village Birth International, and Every Mother Counts. 2019 Mar 25;33

¹⁰ Gruber KJ, Cupito SH, Dobson CF. Impact of Doulas on Healthy Birth Outcomes. *The Journal of Perinatal Education*; New York. 2013 Winter;22(1):49–58.

¹¹ Bey A, Brill A, Porchia-Albert C, Gradilla M, Strauss N. Advancing Birth Justice: Community-Based Doula Models as a Standard of Care for Ending Racial Disparities. Ancient Song Doula Services, Village Birth International, and Every Mother Counts. 2019 Mar 25;33.

¹² What is a Doula [Internet]. DONA International. [cited 2019 Jul 11]. Available from: <https://www.dona.org/what-is-a-doula/>

¹³ Bey A, Brill A, Porchia-Albert C, Gradilla M, Strauss N. Advancing Birth Justice: Community-Based Doula Models as a Standard of Care for Ending Racial Disparities. Ancient Song Doula Services, Village Birth International, and Every Mother Counts. 2019 Mar 25;33.

¹⁴ Fortier JH, Godwin M. Doula support compared with standard care: Meta-analysis of the effects on the rate of medical interventions during labour for low-risk women delivering at term [Accouchement standard ou assisté d'une doula : une comparaison]. *Can Fam Physician*. 2015;61(6):e284-e292.

¹⁵ Kozhimannil KB, Hardeman RR. Coverage for Doula Services: How State Medicaid Programs Can Address Concerns about Maternity Care Costs and Quality. *Birth*. 2016;43(2):97–9.

- Increase the number of Black Birthing People who are informed about the benefits of doula care and offered the opportunity to work with Doulas, particularly Doulas who are from the communities (e.g., geographic, cultural) of or share lived experience of inequities with Black Birthing People.
- Improve the prenatal, labor and delivery, and postpartum care of Black Birthing People through the support of Doulas.
- Support the development of a culture of understanding and mutual respect between Doulas and clinical and administrative staff within Massachusetts Birthing Hospitals and Birth Centers.
- Embed principles of racial equity and Cultural Humility in the design and implementation of programs offering Doula services.

Section IV: Funding Opportunity Description

The HPC is issuing this RFP to solicit Proposals from Eligible Entities (Applicants) who serve a high proportion of Black Birthing People (i.e., at least 9% of maternity discharges) to develop or enhance Programs to provide Doula services to Black Birthing People within their patient populations. Applicants must propose a Program that:

- Develops and implements an approach (e.g., informational events/activities, promotional materials, etc.) to ensuring that Black Birthing People and potential referrers (e.g., community health care providers) are aware of the benefits of doula care and the opportunity to receive Doula services through the Program;
- Secures through contracts with Doulas or Doula Organizations, or through other arrangements, the services of Doulas, with an emphasis on engaging Doulas who are from the communities of, or share lived experiences of inequities with, the Black Birthing People served by the Applicant;
- Offers Doula services to enrolled Black Birthing People from the start of the prenatal period until at least six weeks postpartum, including offering a minimum of six total Doula visits with at least one visit during the prenatal period and one during the postpartum period; and
- Provides a system for communication and care coordination between Doulas and other pregnancy-related care providers for enrolled Black Birthing People.

Programs must be informed by a deep understanding of the communities and people they propose to serve. Applicants should take steps to ensure that their Program design – including the communications approach and the choice of a Doula Organization or individual Doulas to participate – reflects the values, priorities, and needs of Black Birthing People within the community served by the Applicant. Proposals must describe the Applicant’s current understanding of the health inequities for Black Birthing People in its community and how the Program design has been shaped by that understanding. Proposals also must show how the Program will be guided by a framework of Cultural Humility and racial equity throughout its implementation.

Programs must have a clear strategy for securing a Doula workforce that ensures sufficient capacity to meet the target Program enrollment. Applicants must propose establishing or formalizing a relationship with a Doula Organization and/or directly contracting with or employing individual Doulas. As needed, the Applicant may propose to use BESIDE investment program funds to pay for training, continuing education, and/or certification as the Applicant deems necessary as part of a plan to secure an adequate Doula workforce.

Proposals must also demonstrate that the Applicant has created or intends to create an organizational culture and base of knowledge about doula care among its administrative and clinical staff that will

support a respectful and productive working environment within the Program. Applicants may propose to use BESIDE funding to conduct trainings or other activities in support of this goal.

An Applicant that already offers Doula services may propose a Program that uses BESIDE funding to enhance or expand those services consistent with the requirements of this RFP. Funding cannot be used to enhance or expand a current program or services in ways that are inconsistent with RFP requirements.

The Period of Performance of the Award will be approximately 24 months, comprising a mandatory Planning Period of three months followed by an Implementation Period of 21 months. During the Planning Period, Awardees may formalize relationships with Doulas, Doula Organizations and/or other partners/contractors; conduct additional community outreach to inform their Program design; develop and begin to implement an approach to promote awareness of the Program among Black Birthing People and potential referrers; orient administrative and clinical staff to the Program and conduct trainings or other activities that will promote a respectful and productive working environment with the Doulas; and work with the HPC to finalize a Measurement Plan, including appropriate data collection processes. During the Implementation Period, Awardees will execute the Program and implement the Measurement Plan.

Throughout the Period of Performance, Awardees will be obligated to participate in contract management and evaluation activities (see Section V: Measurement and Reporting) and contribute to the HPC's development of resources and learning materials (e.g., guides, tools, summaries) describing key insights from the investment program experience that may be helpful to other organizations working on similar programs.

Prior to the conclusion of the Implementation Period, Awardees will engage in conversations regarding the feasibility and appropriateness of sustaining all or some of the Program for Black Birthing People.

The HPC is investing a total of \$500,000 over two years for the BESIDE investment program, pursuant to Legislative appropriation.¹⁶ The HPC anticipates funding up to three (3) awards at \$150,000-\$200,000 each. In reviewing proposals, the HPC will consider the proposed scope of work in the context of the amount of funding requested by the Applicant.

Section V: Measurement and Reporting

The HPC will monitor and assess the impact of Awardees' Programs. All Awardees will report quarterly on a set of required measures.

Required measures are expected to include:

- Characteristics of enrolled Black Birthing People (e.g., age, insurance status, preferred language, co-morbidities)
- Total number of Black Birthing People offered Doula services through the Program
- Total number of Black Birthing People enrolled during the Period of Performance
- Duration of enrollment of Black Birthing People in the Program, including gestational period at enrollment
- Number of Doula visits conducted during the Period of Performance, stratified by prenatal and/or postpartum periods
- For enrolled Black Birthing People, prenatal and postpartum clinical visit attendance rate

¹⁶ Section 88 of Chapter 41 of the Acts of 2019

These measures are subject to change at the discretion of the HPC between the date of RFP release and the conclusion of the contracting period. In their Proposals, Applicants are required to describe the data sources and collection methods that will be used to report on the required measures. Applicants also may identify additional measures that they propose to collect. In consultation with the HPC, Awardees will submit a final Measurement Plan during the Planning Period to confirm all measurement specifications and data collection plans.

In addition, Awardees will be required to participate in or cooperate, as needed, with measurement activities led by the HPC or its contractor(s) to evaluate the following:

- Provider and staff experience, as may be assessed through interviews with obstetricians and nurses serving Black Birthing People during prenatal, labor and delivery, and postpartum periods; and/or interviews with program administrators;
- Doula experience, as may be assessed through interviews and/or focus groups with Doulas serving enrolled Black Birthing People; and
- Patient experience, as may be assessed through the completion of validated survey tools and/or focus groups with enrolled Black Birthing People.

Section VI. Award Information

The HPC anticipates funding up to three (3) Awards pursuant to this RFP at \$150,000-\$200,000 each for a total of up to \$500,000 available for funding over a 24-month period.

Applicants may receive an Award less than the amount requested and may be asked to adjust elements of their Proposal. The HPC intends to fund the strongest Proposals based on the selection criteria, described in Section VIII. E. The HPC is not obligated to fund a minimum number of Proposals or to distribute a minimum amount of funding for a Proposal. Award amounts will vary based on the proposed budget and scope of the Proposal.

A. Anticipated Timeline

The Contract term shall be for approximately 30 months, including a Period of Performance of 24 months and up to six months of final reporting and evaluation activities, beginning at Contract execution on or about November 1, 2021, and ending on or about May 31, 2023.

All dates are estimated, except for the deadline indicated in **bold** type. All times are Eastern Time.

DESCRIPTION	DATE
1. RFP released	June 10, 2021
2. Information session held by HPC staff	June 29, 2021
3. Deadline for submission of written questions	July 15, 2021 by 3:00 PM
4. Deadline for submission of Proposal	August 5, 2021 by 3:00 PM
5. Awardees selected	September 15, 2021
6. Projected Contract execution	November 1, 2021
7. Period of Performance	November 1, 2021 – October 31, 2022

B. Funding Disbursement

Payment of Awards pursuant to this RFP will be made on a cost reimbursement basis. The HPC will periodically reimburse eligible costs submitted by the Awardee on behalf of the Program, up to a total of no more than the Award cap.

Further, the HPC will withhold a certain percentage of the Award to ensure compliance with requirements of the BESIDE investment program. The HPC will not issue reimbursement beyond 90% of the Award cap until the Awardee has fulfilled all reporting requirements.

The HPC will not be responsible for any costs or expenses incurred by Applicants in responding to this RFP or incurred prior to the effective date of the Contract. Any costs incurred before Contract execution will not be eligible for reimbursement by the HPC.

Applicants must submit proposed budgets in responding to the RFP, reflecting projected spending for the entirety of the Award. Final budgets will be reviewed by the HPC for approval prior to the start of the Period of Performance. Budget modifications during the course of the Contract term, such as additional or revised expenses identified during the Planning Period, will be subject to HPC approval and the Award cap.

C. Termination or Amendment of Awards

The HPC reserves the right to reduce, terminate, or recover payments, in whole or in part, in the event the Awardee fails to perform Contract requirements and provide deliverables substantially as specified in the Contract or if during the Contract term, the Awardee is determined by the HPC to be no longer qualified.

Section VII. Proposal Instructions

To be considered, an Applicant must submit a Proposal to the HPC consistent with the deadlines, requirements, and required information and Attachments described below, and in accordance with the following minimum requirements:

1. A Proposal must be submitted by an Eligible Entity (the Applicant).
2. A Proposal must identify a Financial Designee and an Award Manager.

A. General Proposal Requirements

Each Proposal must include the following:

1. A cover letter signed by the President, a senior executive, or the Board Chair of the Applicant
2. A resume for the Award Manager
3. A complete response (including all Exhibits) for funding as described in Section VII. C, including:
 - a. Operational Response Template (Attachment A, Exhibit 1)
 - b. Budget Response Template (Attachment A, Exhibit 2)
4. Mandatory Contracting Forms. Each Application must include copies of the following documents signed by an authorized signatory of the Applicant:
 - a. Commonwealth Standard Contract Form and Instructions (Attachment B, Exhibit 2)
 - b. Contractor Authorized Signatory Form (Attachment B, Exhibit 3)

Applicants may include letters of support for the Proposal from any relevant organizations or stakeholders.

Proposals must be submitted through COMMBUYS by **no later than 3:00 pm on Thursday, August 5, 2021.**

B. Cover Letter Instructions

Applicants **must** submit a cover letter that includes all of the following information (failure to submit a cover letter including all components may result in disqualification from consideration for funding):

- 1) A statement that the Proposal is an application for Funding Opportunity HPC-BESIDE-2021-001
- 2) The name and principal address of the Applicant;
- 3) A description of the Applicant's legal entity status (e.g., not-for-profit corporation, limited partnership, general partnership, etc.);
- 4) A statement that the Proposal is effective through the date that the Applicant executes a Contract with HPC pursuant to this RFP;
- 5) The specific amount of funding requested (must match the BESIDE-funded figure in the Budget Response);
- 6) Affirmation that if awarded funding, the Applicant will implement the proposed Program as described in the Proposal;
- 7) Affirmation that if awarded funding, the Applicant will submit an Award Plan to be approved by the HPC and incorporated into the Contract;
- 8) Affirmation that if awarded funding the Applicant will begin activities on November 1, 2021 or on the date the Contract is executed, whichever is later;
- 9) A statement that all documents submitted by the Applicant are truthful and accurate;
- 10) A statement that the Applicant has read the RFP and all Attachments and understands the terms and conditions pursuant to which funding may be awarded; and
- 11) An attestation from that Applicant that the following mandatory contract forms, available as Attachments to this RFP, have been signed and are included with the Proposal:
 - a. Commonwealth Standard Contract Form and Instructions
 - b. Contractor Authorized Signatory Form

C. Operational Response Instructions

The Applicant must complete all elements of the Operational Response as described below to be considered. The Operational Response consists of two Exhibits:

- 1) The Operational Response Template (Attachment A, Exhibit 1)
- 2) The Budget Response Template (Attachment A, Exhibit 2)

The Applicant must submit a completed Operational Response Template provided in Attachment A, Exhibit 1 with all questions answered. The Applicant must follow all instructions in the template. An Operational Response may not exceed 20 pages, exclusive of any attachments (e.g., CVs, articles, or MOUs).

Applicants must complete the Budget Response Template provided in Attachment A, Exhibit 2 indicating the funding requested.

Section VIII. Proposal Review, Selection & Award Process

A. General Provisions

This Request for Proposals for the HPC's BESIDE investment program is issued pursuant to Section 88 of Chapter 41 of the Acts of 2019 and the Massachusetts Management Accounting and Reporting System (MMARS) Policy on State Grants and Federal Sub-Grants (Issued 7-1-2004, revised 9-8-2014) (Grants Policy). Many terms included in the Grants Policy, as well as the definitions section of the Operational Services Department (OSD) state procurement regulations (815 CMR 21.02), are incorporated by reference into this RFP. Words used but not specifically defined in this RFP shall have the meanings included in 801 CMR 21.02, or the Grants Policy. Unless otherwise specified, all communications, responses, and documentation must be in English, using English customary weights and measures (feet, pounds, quarts, etc.) and U.S. dollars. All responses must be submitted in accordance with the terms specified in **Definitions**.

The HPC reserves the right to amend this RFP at any time prior to the date responses are due, or to suspend or terminate an Award in whole or in part at any time. Any such amendment will be posted on COMMBUYS. Applicants should check this site regularly, as this will be the sole method for notification of changes.

Awards made pursuant to this RFP shall be for a fixed amount, which amount shall be preliminarily determined and announced to the Awardee at the time of selection and finalized upon Contract execution. HPC makes no guarantee that a Contract, or any obligation to provide funding to any Applicant, will result from this RFP. The HPC also makes no guarantee that funds will be available to successful Applicants on this RFP.

B. Contact of Eligible Entities and any Subcontractors with Health Policy Commission

Selection of Awardees pursuant to this RFP is being conducted consistent with state bidding practices. **Eligible Entities or any agent(s) working on their behalf, are prohibited from communicating directly with any HPC Commissioners or staff regarding this RFP except as specified in Section VIII C. below.** No other individual HPC employee or representative is authorized to provide any information or respond to any question or inquiry concerning this RFP. Any unauthorized communication or contact may result in immediate ineligibility of an Applicant at the sole discretion of the HPC.

Applicants must disclose any interest that will conflict with the performance of services required under any Contract resulting from this RFP.

Applicants with disabilities or hardships that seek reasonable accommodation, which may include the receipt of RFP information in an alternative format, must submit a written statement to the RFP contact describing the Applicant's disability and the requested accommodation. HPC reserves the right to reject unreasonable requests. Applicants may also request a hardcopy of the RFP, pertinent Attachments, or any of its components, by contacting the HPC's contact person for the RFP.

C. Information Session and Questions

The HPC anticipates hosting an RFP Information Session to provide details about this funding opportunity and to answer questions from potential Applicants. The Information Session will provide an overview of this RFP and will describe key topics related to scope, deadlines, submission requirements,

and details of the Proposal submission instructions. The registration link for the Information Session will be located on the HPC's website under "Investment Programs."

The Information session is scheduled as follows and will be held via an online webinar — dates/times are subject to change.

- June 29, 2021 at 12:00-1:00 PM

Applicants may make written inquiries concerning this RFP until no later than **July 15, 2021 at 3:00 pm**, as specified in the Timetable in **Section VI. A** of this RFP. Written inquiries must be sent to HPC-BESIDE@mass.gov. Acknowledgment of receipt may not be provided. HPC will review all questions and, at its discretion and on a rolling basis, prepare written responses to those it determines to be of general interest and relevant to the preparation of a response to the RFP. These responses will be posted on COMMBUYS. HPC may respond individually to an Applicant regarding *de minimis* questions on process that are applicable only to the Applicant, without posting responses on COMMBUYS. A full record of responses will be made available upon specific request.

D. Review and Selection Process

Responses to this RFP will be evaluated by a review committee composed of individuals designated by the HPC Executive Director, pursuant to 958 CMR 5.07. The review committee will review and evaluate each Proposal based on the **Selection Criteria (Section VIII. E)**.

The HPC reserves the right to reject an Applicant's response at any time during the evaluation process if the Applicant:

- a) Fails to demonstrate to HPC's satisfaction that it meets all RFP requirements;
- b) Fails to submit all required information or otherwise satisfy all response requirements in **Section VII**; or
- c) Rejects or qualifies its agreement to any of the mandatory provisions of the RFP or the Commonwealth's Standard Contract Form and Instructions

The HPC may determine that non-compliance with an RFP requirement is insubstantial. The HPC may seek clarification, allow the Applicant to make minor corrections, take the non-compliance into account in evaluating the response, or apply a combination of all three remedies. However, the HPC emphasizes that an incomplete response or a response that does not comply with submission requirements will be disadvantaged and possibly disqualified.

1. Content Expert Review

The HPC may engage subject matter experts to assess the feasibility, impact, and adherence to best-known practices. The review and comment of subject matter experts will be non-determinative and will provide additional information for the consideration of the HPC in evaluation of each Proposal against the Selection Criteria.

2. Clarifications

The HPC may seek additional information from Applicants as necessary to complete review of the Proposal. The HPC must receive all requested additional materials within five (5) business days of a request or the HPC may determine the Proposal is incomplete.

3. Interviews

The HPC may interview some Applicants. Interviews will provide Applicants with an opportunity to present their Proposal and provide answers to questions regarding the Proposal. Specific instructions and an invitation will be provided within a reasonable amount of time prior to a scheduled interview.

4. References

The HPC may request references, verify references, or consider any written references submitted to the HPC, at any time during the Award process and at any time during the Period of Performance.

5. Selection and Notification of Awardees

The review committee will recommend Applicants to the Executive Director to receive Awards and the amounts to be awarded. The Executive Director will subsequently make recommendations to the Board. The amounts to be awarded may be an amount greater than or less than that requested by the Applicant. Recommendations for Awards will be made based on the availability of funds, the degree to which an Applicant meets criteria described in this RFP, and the degree to which the Proposal meets the Applicant's need for funding.

The Executive Director may recommend Awards based on the Proposals that demonstrate the best value overall, including proposed alternatives to Proposals as submitted, which will achieve the Commonwealth's and HPC's goals for the BESIDE investment program. During finalization of the Contract, the HPC and an Awardee may negotiate a change in any element of the Awardee's Proposal that results in lower costs or higher impact.

The Board will make the final Award decisions based on the recommendations of the Executive Director and criteria in this RFP and authorizing statutes and regulations. The Board's decisions are final and not subject to further review or appeal. The HPC will notify all Applicants of their selection or non-selection for an Award. All Awards are contingent upon finalization of Contract terms by the Applicant and the HPC.

E. Selection Criteria

This section describes the criteria for review and selection of Awards for this RFP. The Proposal must be organized as detailed in **Section VII**. The HPC will assemble a review committee to evaluate all Proposals submitted in accordance with **Section VII**, that meet the minimum requirements listed in **Section VII**. In addition to the Proposal as submitted, the HPC may consider any relevant information about the Applicant known to HPC, including, but not limited to, HPC's prior experience working with the Applicant, as applicable. Proposals will be scored based on a total of 100 points. The following criteria will be used to evaluate each Proposal:

1. Applicant (15 points)

- Demonstrated alignment of the Applicant’s patient population with the BESIDE target population (i.e., number and/or proportion of birthing people served who are Black)
- As may be applicable, past performance in HPC investment awards (e.g., contract management, model adaptability, participation in learning and dissemination activities, impact, results)

2. Racial Equity Commitment (20 points)

- Demonstrated organizational commitment of the Applicant to addressing racial equity in health care service delivery
- Comprehensiveness of the Applicant’s understanding of the inequities for Black Birthing People in its community, and their values, priorities, and needs
- Appropriateness and feasibility of approach to ensuring that the Program will be guided by a framework of Cultural Humility and racial equity through its implementation

3. Proposed Program (20 points)

- Strength of the proposed approach to raising awareness of the benefits of doula care and informing Black Birthing People and their referrers about the opportunity to receive Doula services as part of the Program
- As applicable, feasibility and appropriateness of the proposed approach to expanding the Applicant’s existing doula program in ways consistent with the requirements described in this RFP
- Feasibility and reliability of the proposed approach to securing a Doula workforce of adequate scale for the Program. For Applicants proposing to contract with a Doula Organization, this includes preference for Applicants that identify one or more specific Doula Organizations as subcontractors in their Proposals
- Feasibility and reliability of the proposed approach to securing a workforce of Doulas who are from the communities (e.g., geographic, cultural) of, or share lived experiences of inequities with, the Black Birthing People served by the Applicant
- Alignment of the proposed Program with the requirements for the scope and duration of Doula services and the number of Doula visits described in this RFP
- Strength of the proposed approach to providing a system for communication and care coordination between Doulas and other pregnancy-related care providers for enrolled Black Birthing People
- Demonstrated organizational culture and base of knowledge about doula care or commitment to developing organizational culture and base of knowledge about doula care among the Applicant’s administrative and clinical staff that will support a respectful and productive working environment within the Program; or reliability of the proposed approach to accomplishing this requirement

4. Measurement and Data Collection (15 points)

- Clarity and adequacy of proposed processes and capabilities for collecting and reporting on required measures and any additional proposed measures to the HPC

5. Budget (20 points)

- Appropriateness of the budget to achieve proposed activities and goals of the Program
- Efficiency of the proposed budget

6. Sustainability and Scalability (10 points)

- Presence of a clearly articulated plan to use Program results to support strategies within the Applicant organization that advance health equity and care for Black Birthing People and/or long-term Program sustainability
- Feasibility of intended approach to scaling a successful Program

Section IX. Additional Terms and Details

A. Responsibilities of Eligible Entities

Applicants are solely responsible for obtaining all information distributed for this solicitation on COMMBUYS. Any documents amended through the course of this RFP will be retained on COMMBUYS.

It is each Applicant's responsibility to regularly check COMMBUYS for:

- 1) Any addenda or modifications to this RFP, including any questions and answers.
- 2) Any records or documents related to Information Sessions hosted relative to this funding opportunity.
- 3) The Commonwealth accepts no responsibility and will provide no accommodation to Applicants who submit a Proposal based on an out-of-date document or on information received from a source other than [COMMBUYS](#) or from a written communication from a permissible contact as specified in **Section VIII. B.**

B. General Requirements

1) Electronic Communication/Update of Applicant's/Awardee's Contact Information

It is the responsibility of the Applicant/Awardee to keep current the email address of the contact person and prospective Award Manager, if awarded a Contract, and to monitor that email inbox for communications from the HPC, including requests for clarification. The HPC and the Commonwealth assume no responsibility if an Applicant's/Awardee's designated email address is not current, or if technical problems, including those with the Applicant's/Awardee's computer, network or internet service provider (ISP) cause email communications sent to/from the Applicant/Awardee and the HPC to be delayed, lost or rejected by any means, including electronic mail or spam filtering. Where no other email address is provided to the HPC, communications will be sent by default to the Chief Executive Officer of an Applicant/Awardee.

2) Electronic Funds Transfer (EFT)

All Applicants responding to this RFP must agree to participate in the Commonwealth Electronic Funds Transfer (EFT) program for receiving payments. EFT is a benefit to both Awardees and the Commonwealth because it ensures fast, safe and reliable payment directly to contractors and saves both parties the cost of processing checks. Awardees are able to track and verify payments made electronically through the Comptroller's Vendor Web system. Additional information about EFT is available on the [VendorWeb](#) site (www.mass.gov/osc).

Successful Applicants, upon notification of Contract Award, will be required to enroll in EFT as a Contract requirement by completing and submitting the *Authorization for Electronic Funds Payment Form* to the

HPC for review, approval and forwarding to the Office of the Comptroller. If the Applicant is already enrolled in the program, it may so indicate in its Proposal. Because the *Authorization for Electronic Funds Payment Form* contains banking information, this form, and all information contained on this form, shall not be considered a public record and shall not be subject to public disclosure through a public records request. An Applicant who is currently registered with the Commonwealth to receive payment by EFT is not required to submit forms described herein.

3) Identifiable Health Information

Any activities conducted by the Applicant or Awardee pursuant to this RFP that generate or use information or data involving the use or disclosure of protected health information are subject to the requirements of 45 CFR 160, 162, and 164 (the privacy provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA)) and also may be subject to the requirements of the federal Drug and Alcohol Confidentiality Law, 42 CFR part 2. The Applicant or Awardees is responsible for compliance with HIPAA, 42 CFR part 2 and all other applicable state or federal legal requirements.

4) Incorporation of RFP

This RFP and any documents an Applicant submits in response to it are incorporated by reference into any Contract that may be awarded to that Applicant.

5) Public Records

All responses and related documents submitted in response to this RFP are public records and are subject to the Massachusetts Public Records Law, M.G.L. c. 66, § 10 and M.G.L. c. 4, § 7(26). Any statements in submitted responses that are inconsistent with these statutes will be disregarded. HPC will not return to Applicants any Proposals or materials they submit in response to this RFP.

6) Press Conferences or News Release Restrictions

No Applicant or Awardee shall make any press conference, news releases, or announcements concerning its selection for an Award prior to the HPC's public release of such information or prior to the written approval of the HPC.

7) Contract Award Letter

The identification of an Awardee in a notice of Award creates no contractual or legal obligation for the HPC. An Awardee may not rely on an award letter or any other verbal or written assurances from any sources, to begin performance or otherwise incur obligations for which the Awardee anticipates funding through the Award. Performance for which an Awardee seeks compensation may not be delivered outside the scope of a properly executed Contract, and an Awardee assumes the risk that funding will not be available for any costs incurred.

8) Restriction on the Use of the Commonwealth Seal

Applicants and Awardees are not allowed to display the Commonwealth of Massachusetts Seal in their Proposal or subsequent marketing materials if they are awarded a Contract because use of the coat of arms and the Great Seal of the Commonwealth for advertising or commercial purposes is prohibited by law.

9) Restriction on the Use of the Health Policy Commission logo and branding

Applicants are not allowed to display the Health Policy Commission logo and branding in their Proposal. Awardees are allowed to display the Health Policy Commission logo and branding only as specified in any Contract with the HPC.

10) Requests for Reasonable Accommodation

Applicants with disabilities or hardships that seek reasonable accommodation, which may include the receipt of RFP information in an alternative format, must submit a written statement to the RFP contact persons describing the Applicant's disability and the requested accommodation to the contact person for the RFP. HPC reserves the right to reject unreasonable requests. Applicants may also request a hardcopy of the RFP, pertinent Attachments, or any of its components, by contacting the permissible RFP Staff.

C. Contract Documents

All Applicants selected to receive an Award must execute a Contract with the HPC, as required by 815 CMR 2.05 and, as applicable, to implement the terms of the Award and in order to receive payment. The Contract shall consist of the following documents: the Commonwealth Standard Contract Form, which shall include a description of the approved scope; this Request for Proposals; the Notice of Award; and, Contractor's response to the RFP, exclusive of any terms that are inconsistent with, or purport to modify or supersede the Commonwealth's Terms and Conditions or the Standard Contract Form. Applicants are required to submit signed copies of the Commonwealth Standard Contract Form and Instructions and Authorized Signatory Form (collectively, Contracting Forms) with their Proposals. Copies of the Contracting Forms are attached to this RFP. In addition, as part of the contracting process, each Awardee also will be required to sign a Request for Taxation Identification Number and Certification (W-9), an Authorization for Electronic Funds Transfer, and a Certification Regarding Disbarment and Suspension.

Section X. Appendix

Listing of External Attachments

Attachment A: Mandatory Submission Templates

Exhibit 1: Operational Response Template

Exhibit 2: Budget Response Template

Attachment B: Mandatory Contracting Forms

Exhibit 1: Commonwealth Terms and Conditions

Exhibit 2: Commonwealth Standard Contract Form and Instructions

Exhibit 3: Contractor Authorized Signatory Form