

**Kentucky**  
**Colon Cancer Screening Program**  
**2014 – 2016**

**Request for Applications**  
**January 6, 2014**

**(502) 564-7996 x-4441**

**APPLICATION DEADLINE: April 1, 2014 @ 5:00 p.m. EST**



**Kentucky Public Health**  
Prevent. Promote. Protect.

**2014 – 2016**  
**Kentucky Colon Cancer Screening Program Grant Timeline**

January 6, 2014	RFA Release and Technical Assistance Meeting @1:00 p.m. EST KDPH Building, Frankfort, KY <b>Pre-registration is Required</b> <a href="mailto:Janet.luttrell@ky.gov">Janet.luttrell@ky.gov</a>
January 21, 2014	Q & A Conference Call @ 10 a.m. EST 1-877-746-4263 Passcode 0224511#
April 1, 2014	<u>Submission Deadline</u> Grant applications must be Received by 5:00 p.m. EST
May 1, 2014	<u>Award Notification</u> – Applicants will be notified of funding decisions by email
July 1, 2014 – June 30, 2015 July 1, 2015 – June 30, 2016	<u>Grant Cycle Project Period</u> Grant Year One Grant Year Two

For questions or to pre-register for technical assistance contact Janet C. Luttrell at 502-564-7996 x-4441 or at [janet.luttrell@ky.gov](mailto:janet.luttrell@ky.gov)

**BACKGROUND**

In the 2008 Regular Session of the General Assembly, the Kentucky General Assembly enacted House Bill 415 which provided for the development of a colon cancer screening program within the Kentucky Department for Public Health to address the needs of colon cancer screening of the uninsured, limited to the amount of funding provided. While no funds were appropriated to implement a screening program, the Department moved forward to establish the Kentucky Colon Cancer Screening Program (KCCSP) and planned for when funds would become available. In the 2012 Regular Session of the General Assembly, the Kentucky General Assembly approved the biennial budget which included funds for colon cancer screening of the uninsured which included the Kentucky Cancer Foundation providing equal matching funds.

The amount of funds designated specifically to this program will not be known until after grant applications have been received for the new funding cycle.

## FUNDING PROCEDURES

### Who Can Apply?

Successful applicants for funding by the Kentucky Colon Cancer Screening Program (KCCSP) must be joint ventures between a local health department as the fiscal agent, the **regional office of the Kentucky Cancer Program (KCP)** and entities such as local primary care clinics, Federally Qualified Health Centers, Free Clinics or other agencies, organizations, associations or coalitions which serve the programs target population. These partners must agree to work together to identify and recruit eligible participants and provide the required program services.

In order to be considered complete, all applicants must include the 2 required components of the grant:

- 1) The Application Worksheet,
- 2) The application narrative (12 pages single spaced with 1" margins 12 point font)

The KCCSP has authority to approve or disapprove applications, and all decisions will be final.

1. The current average grant award is \$160,000 per applicant (\$80,000 per year). KCCSP reserves the right to grant less than the total amount requested. It should be noted that matching private funds will be awarded only as they become available and as needed up to grant award amount.
2. KCCSP reserves the right to realign uncommitted funds as necessary.
3. Funding will be based on points allocated as described in section "Application Guidelines" below. Incomplete applications will not be considered.
4. Funds may be applied to support existing or new projects. However, applicants must demonstrate the requested funds do not supplant/replace existing funding.
5. Grants are approved for one funding cycle (7/1/14 – 6/30/16).

### Funding Restrictions

1. Funds may not be used for the purchase of equipment (computers, printers, TV's, furniture, etc.).
2. Funds may not be used to supplant, or replace, funding that is currently available.
3. Applicants for these funds must partner with the local health department as the fiscal agent and the Kentucky Cancer Program for outreach and education.
4. Please note that funds are not available to cover the cost of complications due to screening or for treatment of cancers needing treatment over and above removal of polyps – you must identify methods of referring patients for further treatment and follow-up when needed.

### Program Overview

The KCCSP design is based on the experience of pilot programs which have been providing colon cancer screenings in Kentucky, and on the experience of other states in providing colon cancer screening to low income, uninsured adults (more details on patient eligibility are provided below).

This grant program is designed to invest in projects that provide colorectal cancer (CRC) FIT Screening and Colonoscopy Screening to Low Income, Uninsured residents of Kentucky. We anticipate that 75% of

the screenings will be FIT screenings, provided to average risk patients, and approximately 25% of screenings will be colonoscopies provided to those at high risk for CRC and/or those who have positive results from the FIT screening. FIT screenings will be mailed (postage paid) to the state lab for analysis.

Regardless of the procedure done, each patient must also receive support through the screening process, and data on the patients screening and any lab/test findings must be entered in an electronic patient surveillance and tracking system which will be provided to all sites. Unfortunately, these funds cannot be used to pay for complications arising from the screening procedure, nor for treatment of cancers found during the procedure. The group of partners applying for funding must submit a plan for addressing complications and treatment as part of this application. The treatment and complication plans must clearly show that communication has occurred between partners for additional services for these services.

The Affordable Care Act is affecting the KCCSP in several ways. As uninsured Kentuckians enroll under the ACA, KCCSP will evaluate our current program. It is estimated it will be two to three years before 70% of uninsured Kentuckians enroll. Therefore, until that time the KCCSP will continue to offer services. As the number of insured Kentuckians increase our program eligibility may change.

The KCCSP functions with the use of patient navigators who are required to complete a training program conducted by state KCCSP staff. The role of the patient navigator includes but is not limited to the following: outreach and education of the community, training and teleconferences, participation in site visits, verification of participant eligibility, assist patient through the screening process, instruction and use of the FIT kit and printing the lab requisition, navigate patients with abnormal screening results to colonoscopy or if colon cancer diagnosis to additional services/navigators, and enter required information into the appropriate data management system. Attached is a flow chart detailing the screening process from assessment through FIT screening, colonoscopy, and cancer treatment if needed.

FIT screenings will be given to an eligible patient to take home and mail in for analysis. All KCCSP FIT screenings will be mailed to the Kentucky State Lab for analysis. Anyone with a positive FIT screening must be cleared by a MD, DO, PA, or APRN (LHD Women's Health APRN's are not approved providers) for medical clearance prior to colonoscopy. A provider can verify clearance (by completing appropriate clearance form) if patient has been seen within the previous 12 months.

Patients determined to be at increased risk for colon cancer (based on American Cancer Society Guidelines) will be eligible for a colonoscopy. A program risk tool is provided.

Services will be reimbursed for successful completion at the following rates:

- \$20 for patient navigation for each completed FIT screening returned to the State Lab for analysis and data entered into the data management system. Instruction on FIT must be face-to-face.
- \$30 for patient navigation for each patient referred for colonoscopy and findings entered into the data management system.
- \$1,000 for Colonoscopy includes facility, provider, prep, sedation and pathology. If a site negotiates a lower rate for these services, the difference must be reinvested into the program in the form of additional colonoscopies. This must be reflected in the Application Worksheet Budget.

#### Services NOT COVERED

- Office visits to evaluate appropriateness for Colonoscopy **ARE NOT** covered under this grant unless negotiated as part of \$1,000 colonoscopy fee. Applicants may consider whether partners will donate these services as in kind.
- The cost of treating cancers detected.
- The cost of addressing complications from procedures.
- Pre-op testing unless negotiated as part of \$1,000 Colonoscopy fee.

#### **Role of the Local Health Department:**

The local health department is the convener of the group to apply for this funding, and will be the fiscal agent in administering this grant. As the fiscal agent, the local health department will receive a yearly administrative fee of \$6,000 which is part of the total grant award. As fiscal agent, the local health department must be the entity that receives the grant funds from the state and the entity which establishes contracts with local hospitals, endoscopists, Federally Qualified Health Centers, Community Health Clinics or other providers as necessary to carry out services funded under this grant. All contracts are approved by the KCCSP state staff for KCCSP specific language. All-inclusive contracts are encouraged but may not be possible in all areas. Service providers must provide agreed upon documentation of services provided to the LHD for reimbursement at the rates specified above. If appropriate, the LHD may serve as the medical home for those screened under this program. This may include patient navigation and data collection services.

The LHD may refer their patients for services in this program – women receiving screening under the Breast and Cervical Cancer Screening Program are likely candidates for CRC screening. However, the local health department patients should not be the sole source of participants for this program.

Groups applying for funding under this RFA may choose to cover a region with multiple counties and may choose to have only ONE LHD serve as the fiscal agent for this multi-county area. However, there must be clear evidence that there are partners across the multi county area who will be actively involved in recruiting patients for the program on a consistent basis and arrangements for providing patient navigation for people in those counties.

Over the last two years, we were approached by people across Kentucky who were at increased or high risk who were in need of colonoscopy. KCCSP sites will be required during the FY14-16 grant cycle to provide services to patients who reside outside of their service area. A limited number of funds will be provided to cover the cost of patient navigation and colonoscopy of these patients in addition to your original allocation. These patients must be pre-approved/referred through state KCCSP staff for reimbursement from these additional funds.

The LHD **MUST** ensure that their partners in providing CRC screening collect and enter the data needed to track program services/participants as a requirement for reimbursement. LHD must assure that colonoscopy providers provide data within 60 days of service and that data is entered into the data management system within 30 days of receipt.

A letter of commitment must be submitted from each local health department director acknowledging services that will be provided by their organization.

### **Role of the Kentucky Cancer Program (KCP):**

The KCP network of Regional Cancer Control Specialists will work with community partners to provide support in promoting the program to those in the eligible target population, such as connecting eligible participants to the appropriate screening provider or connecting patients to a medical home. KCP is under contract with KCCSP to provide outreach and education services to KCCSP sites.

A letter stating their plan, specific to each KCCSP site, must be submitted from KCP detailing the services that will be provided by their organization.

### **Medical Clearance for Colonoscopy:**

By definition, many of the low income, uninsured patients' eligible for CRC screening may not have a medical home. This population often uses ER's for their medical needs, or visit different free or low cost clinics when they have acute medical needs.

Anyone referred for a colonoscopy must be medically cleared by a MD, DO, PA, or APRN (LHD Women's Health APRN's are not approved providers) prior to colonoscopy. A provider can verify clearance (by completing appropriate clearance form) if patient has been seen within the previous 12 months.

In addition to medical clearance the same provider may also provide education on proper colon prep and provide the material for prep.

The partners developing this CRC screening program are encouraged to have a way of connecting certain individuals to a medical home, including: those with a positive FIT screening and those increased risk individuals.

A letter of commitment must be submitted from the designated medical clearance provider acknowledging services that will be provided by their organization.

### **The Role of the Colonoscopy Provider and Facility:**

\$1,000 for Colonoscopy includes facility, provider, prep, sedation and pathology. If a site negotiates a lower rate for these services, the difference must be reinvested into the program in the form of additional colonoscopies. There must be a contract between the LHD and the entity providing the colonoscopy to facilitate payment for colonoscopy services. The facility/provider(s) may not bill the patient for any services related to the procedure. All-inclusive payments are encouraged but may not be possible in all areas. Providers will not be eligible for reimbursement until procedural and pathology reports have been submitted to patient navigators for the findings to be entered into the data management system. Prep quality is a mandatory reporting element within these reports.

A letter of commitment must be submitted from the colonoscopy provider and facility acknowledging services that will be provided by their organization.

### **The Role of Other Partner Organizations:**

Many different types of organizations or groups may be appropriate partners in the planning and delivery of CRC screening services. The proposal should clearly state the role of each entity in the program and clarify which specific entities will be providing services eligible for reimbursement (i.e. distributing FIT screenings and/or providing patient navigation). For example, faith based organizations, service clubs, neighborhood associations or civic organizations may be helpful in recruiting participants for CRC screening by referring to the local patient navigator. Based on the first two years of the program, KCCSP considers such partnership critical to the success of program operation.

A letter of commitment must be submitted from all other partners acknowledging services that will be provided by their organization.

### **The Role of the Kentucky Department for Public Health:**

The Kentucky Department for Public Health will provide an electronic data management system to document demographic data on patients served, services provided, lab and examination results, complications, cancers detected and other items necessary to track the quality and quantity of services provided with this funding.

All FIT screenings will be mailed to the state health laboratory for analysis, and their electronic system will be used by your program in ordering the test, and will report back the results of the test to the entity placing the order. KCCSP provides FIT kits to all grantees and funding to the Kentucky State Laboratory for processing of these kits.

The Division of Administration and Financial Management (AFM) will distribute funds to local health departments who are chosen based on this application process.

#### **Patient Eligibility Criteria:**

A Person shall be eligible for screening through the Kentucky Colon Cancer Screening Program if he or she:

1. Has not attained the age of 65 and covered by Medicare Part B;
2. Is 50 years old or is less than 50 years old and meets one of the increased risk categories as defined by ACS guidelines; 45 for African-Americans;
3. Is a United States citizen or legal residents;
4. Is a legal resident of Kentucky;
5. Is at or below 250% of the annually published US Health and Human Services income guidelines for poverty level;
6. Does not have health insurance.
7. Does not have Medicaid nor is Medicaid eligible (must be verified in the Medicaid system and must document).
8. Limitation: A person who is determined to have received services without prior authorization from a funded site is not eligible for payment through this program.

## APPLICATION GUIDELINES

The following components are required elements of a completed application packet, and must be included for consideration of funding:

- I. Application Worksheet – A completed Application Worksheet must be submitted as the cover sheet to the completed application.
- II. Application Narrative. All applicants must include the following:
  1. **Population/Need. *It will not be necessary for applicants to include this category in their grant application.*** This area will be scored based on an index which takes into consideration the proportion of low income uninsured adults aged 50-64 AND the number of late stage colon cancer cases in each county. A spreadsheet showing how each county ranks and the estimated number of people in the target population is included as an attachment to the RFP. **20 points**
  2. **Partnerships.** Describe your organization(s) and its ability to carry out activities. Include a description of each community partners that will provide services and the service that will be performed. Applications must demonstrate ability to bring together stakeholders to support proposed activities. **20 points**
  3. **In Kind.** Provide a description of committed in kind contributions to be provided by your community partners (i.e. donated colonoscopies, office visits, treatment services, staff time, etc) as well as a letter of commitment from each partner. **20 points**
  4. **Recruitment (Targeted Outreach/Education).** We have found it is very important that a site not depend solely on health department patients as their clientele for the KCCSP. Collaborate with your Kentucky Cancer Program Regional Cancer Control Specialist and other community partners to describe, in detail, how participants that are not current health department patients will be identified, what outreach and education activities you and your community partners propose to implement and a timeline for implementation. **30 points**
  5. **Ability to do Patient Navigation/Follow Up.** Describe how the patient flow process will work at your site and describe your and your partner's abilities to carry out patient navigation activities. Include letters of commitment from community partners with which you will be working during the patient navigation process (See #9). **40 points**
  6. **Service Area.** Describe the area in which services will be provided. If serving county(s) outside of regular service area, patient navigation must be made available in that county face to face on a consistent basis. **20 points**
  7. **Data Collection and Reporting.** Describe your organization's ability to collect and enter data and carry out required activities. **30 points**
  8. **Complications and Treatment Plan.** Describe your plan for covering the cost of treating complications due to colonoscopies, and your plan for treatment of cancers needing treatment over and above routine removal of identified polyps. These treatment plans should include specific information and telephone numbers of who KCCSP patient navigators will contact in the event of a complication or diagnosis of cancer to address additional resources that are not covered by this program (i.e. financial, emotional, etc.). **30 points**
  9. **Letters of Commitment.** So that your site is ready to begin offering services at the beginning of July 2014, it is necessary to develop all relationships and to get

commitments from partners that will be involved in this program now. Letters of commitment from each partner should be attached to your grant application. These letters should come from partners such as gastroenterologist or surgeon, physician providing medical clearance, anesthesiologist, hospital or surgery center and pathologist. **30 points**

Applicants are encouraged to use as much detail as necessary to fully respond to the criteria, yet be as succinct as possible. Additional material and attachments will not be considered. Maximum page limit for the narrative portion (not to include budget narrative) is **12 pages single-spaced 12 point font with 1" margins**. The budget narrative and the application worksheet do not count toward the page limit (use provided template).

- III. Application Submission – Applications must be submitted to the KCCSP no later than 5:00 p.m. EST on April 1, 2014 in the following way:
- **Electronically:** Applications must be submitted to [janet.luttrell@ky.gov](mailto:janet.luttrell@ky.gov) in a .pdf or word document.

Once submitted, applications will be considered final and will be approved or declined for funding. KCCSP reserves their right to grant less than the total amount requested.

- IV. Successful applications – to be successful, applicants must demonstrate within the application narrative the following:
- a) Demonstrated ability to bring together key stakeholders (local agencies, partners, medical providers, individuals) to collectively support proposed activities – **required**;
  - b) Capacity, competence and experience to accomplish grant objectives and activities;
  - c) Services are provided in partnership with the local health department, community partners, and the Kentucky Cancer Program;
  - d) Demonstrated willingness to collaborate with the KCCSP;
  - e) Assure that funding requested will not supplant funds currently received by the applicant;
  - f) Responsibilities of partners are outlined in the plan;
  - g) A budget appropriate for the level of activities planned.

KCCSP reserves the right to reject, in whole or in part, any or all applications, to advertise for new applications, to abandon the need for such services, and to cancel this RFP if it is in the best interest of KCCSP. Applicants will be rejected for the following reasons:

1. Failure to submit application by 5:00 p.m. EST on April 1, 2014.
2. Failure to include all required information or sufficient information to determine whether all RFP requirements have been satisfied.
3. Failure to follow the application instructions.
4. Providing misleading or inaccurate information.
5. Failure to respond to a request for information or documents.
6. Application Narratives that exceed the 12 single-spaced page limit with 12 point font and 1" margins.

## AWARD PROCEDURES

Applicants will be notified no later than COB May 1, 2014 by email of funding decisions. Memoranda of Agreement that outline contract deliverables (based on grant application submitted) will be mailed at that time. The funding cycle will be July 1, 2014 – June 30, 2016. The KCCSP reserves the right to grant less than the total amount requested. All funding decisions by the KCCSP are final.

Screening and patient navigation services will be reimbursed monthly based on services rendered and entered into the KCCSP data collection system.

### Conditions of Funding:

1. All grantees must sign the KCCSP Memorandum of Agreement (with contract deliverables) in order to receive grant funds.
2. Grantees must acknowledge KCCSP as the funding source for any KCCSP funded material and must obtain written approval from KCCSP prior to development and distribution. The use of the KCCSP logo cannot be utilized without the written permission of the KCCSP.
3. With the assistance of the KCCSP, grant recipients will submit a press release to local media to acknowledge being a 2014 KCCSP grant recipient.
4. All grantees will support KCCSP sponsored events through planning, promotion and attendance. Training funds will be allocated in the total grant award. **Required** trainings include:
  - New KCCSP site training for all patient navigators and grant coordinators (anyone who enters information into the data management system or interacts with patients must be trained by state staff).
  - Yearly patient navigators training
  - Any database updates
  - Site visits – patient navigator attendance required at all local and regional visits
    - i. First year – 3 site visits
    - ii. Second year – 2 site visits
  - Colon Cancer Annual Fall Forum – highly recommended for all sites
  - Bi-Monthly Program Conference Calls – highly recommended for all patient navigators and grant coordinators
5. Agree to coordinate all contracts between the local health department and local service providers. Template of required language will be provided. All contracts are to be approved by the KCCSP state staff for KCCSP specific language. All-inclusive contracts are encouraged but may not be possible in all areas. Service providers must provide agreed upon documentation of services provided to the LHD for reimbursement at the rates specified above.
6. All grantees will be required to submit narrative progress reports every six months. A format will be provided. These reports are due:
  - December 31, 2014
  - June 30, 2015
  - December 31, 2015
  - June 31, 2016

7. Agree to collect specified uniform data items (demographic and clinical) using uniform data forms and administer release of medical records and consent forms to individuals screened. (KCCSP will provide forms). Additionally, endoscopy procedure notes and pathology report must be obtained for each completed procedure.

Funded grantees must meet the following administrative requirements for contract compliance:

- Assure documented fiscal integrity of all grant funds by maintaining a separate bank account or in the case of local health departments a separate cost center for grant funds.
- Assure contract deliverables (outlined in grant application and Memorandum of Agreement) are met.
- Establish and maintain communication with KCCSP representatives (at a minimum monthly).
- Meet regularly with designated KCCSP representatives to monitor project progress.
- Assure compliance with **reporting** requirements and provide completed patient data, complications and consent forms.
- Maintain phone and email capability. Notify of any changes in contact information.
- Support the mission, vision and values of the KCCSP.

**KDPH Role:**

- Training on program implementation
- Provide software/data collection system
- Analyze FIT kits
- Monitoring of expenditures and funding
- Provide technical assistance
- Monitor program quality and outcomes

<b>TECHNICAL ASSISTANCE</b>
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A program training and technical assistance meeting will be held on January 6, 2014. Current KCCSP staff training will be conducted beginning at 9 a.m. A technical assistance meeting related to this RFA will be conducted beginning at 1:00 p.m. EST. Both meetings will be conducted at the Kentucky Department for Public Health, 275 East Main Street, Conference Suites, Frankfort, KY 40621. Pre-registration is required. Contact Janet Luttrell at 502-564-7996 x-4441 or [janet.luttrell@ky.gov](mailto:janet.luttrell@ky.gov) to pre-register.