**REQUEST FOR PROPOSALS (RFP)**

**Disability and Health Secondary or Existing Data Analysis**

**Applications Due January 30, 2024, 5:00 pm EST**

**I. Summary Information**

**Purpose**: This RFP is to identify subrecipients to conduct timely analyses of existing data to answer targeted research or policy questions related to disability and health, such as health services utilization, disability measurement, health equity, post-COVID conditions, and emergency preparedness.

**Proposal Due Date and Time**: *January 30, 2024, 5:00 pm EST.*

**Selection Announcement Date**: February 6, 2024*, 5:00 pm EST*

**Maximum Funding Amount**: $235,000 total

**Estimated Period of Performance and Final Report Date**: February 6, 2024 - July 31, 2024

**Eligibility**: All states and territories in good standing with ASTHO are eligible to apply.

**ASTHO Point of Contact**: Disability and Preparedness Team, [PublicHealth@aucd.org](mailto:PublicHealth@aucd.org) with the subject line “RFP: Disability and Preparedness Data Analysis.”

**II. Description of RFP**

**Purpose:**

With support from the Centers for Disease Control and Prevention (CDC), the Association of State and Territorial Health Officials (ASTHO), and the Association of University Centers on Disability (AUCD) are seeking the services of highly qualified subrecipients that specialize in disability inclusion, disability measurement, health equity, and/or emergency preparedness and have expertise in health disparities among people with disabilities and data analysis methods. Under this contract, the subrecipients will coordinate with ASTHO and AUCD on analyzing existing data or survey results on topics of importance for understanding and addressing the needs of people with disabilities.

**Background**

People with disabilities experience health disparities. ASTHO, AUCD, and CDC are committed to addressing gaps that lead to health disparities for people with disabilities. ASTHO and AUCD, in collaboration with CDC, are seeking to address disability health gaps by analyzing existing data on topics of importance for understanding and addressing the needs of people with disabilities.

As part of this project, ASTHO and AUCD will support research to better understand the needs of people with disabilities by understanding and addressing health disparities. Topics may include but are not limited to ​understanding disparities in morbidity and mortality among adults with disabilities following emergencies, disability due to post-COVID conditions, examining differences in disability prevalence estimates across surveys using standard functional disability question sets, characterizing mental health status and service needs among people with disabilities, and understanding how disability prevalence estimates are used for specific policy, eligibility, and services allocation. ASTHO and AUCD require the expertise of an experienced researcher to support the analysis of an existing disability data source(s). The subrecipient should have access to an existing data source(s). Data sources could include but are not limited to large national surveys, surveys that are representative of the applicant’s state, territorial, local, or tribal jurisdiction, claims-based data sources, vital records, disease registries, or other data sets that include population-based cohorts of people with disabilities. The subrecipient will need to possess subject matter expertise in disability and health and epidemiologic research methods.

**Project activities**

1. **Participate in biweekly or monthly check-in calls with ASTHO program staff.**

The selected subrecipient will participate in monthly meetings with ASTHO and AUCD staff to provide updates on project advancements and to receive technical assistance on the analytic project. These meetings will provide a regular opportunity for the subrecipient and ASTHO staff to have general discussions about the overall project and to address any new issues, questions, or requirements that might arise.

1. **Analyze existing data on topics of importance** **for understanding and addressing the needs of people with disabilities.** **Areas of analysis may include but are not limited to:**

* Understanding disparities in morbidity and mortality among adults with disabilities following emergencies.
* Examining differences in disability prevalence estimates among adults across surveys using standard functional disability question sets. Analyses examining possible methodological explanations to disability prevalence as identified using the ACS-6 question set on comparable years of the Behavioral Risk Factor Surveillance System (BRFSS) and the American Community Survey (ACS) are of particular interest.
* Understanding how disability prevalence estimates from population-based surveys (e.g., ACS, BRFSS, National Health Interview Survey (NHIS)) are used for specific policy, eligibility, and services allocation.
* Characterizing mental health status and service needs among adults with disabilities.
* Understanding disparities in morbidity and mortality among adults with disabilities following emergencies or associated with variation in access to services and supports.
* Evaluating change in disability due to post-COVID conditions (e.g., new or changed disability-associated functioning).

Selected subrecipients will finalize a research question and analysis plan within the first month of the contract.

1. **Contribute to up to one capacity-building product.**

The subrecipient will be responsible for contributing to up to one capacity-building product (e.g., ASTHO Connects webinars, training, ASTHO blogs, ASTHO Experts podcasts, ASTHO Experts videos, and ASTHO reports, peer-reviewed manuscript), focusing on key results and outcomes of the data analysis.

**Expected Outcomes/Expectations and Deliverables**

By successfully achieving these outcomes and delivering the specified products, the subrecipient will contribute to advancing knowledge and practices related to disability and health, facilitating effective decision-making, resource allocation, and support systems for individuals with disabilities.

1. *Thoroughly Developed Research Question Proposal:* The selected subrecipient will craft a well-defined research question that pertains to understanding and effectively addressing the requirements of individuals with disabilities during emergencies. This question will serve as the foundation for the subsequent data analysis process. This question will be finalized within the first month of the contract.
2. *Comprehensive Data Analysis Plan:* The subrecipient will develop a comprehensive plan for data analysis, encompassing strategies for addressing the aforementioned research or policy question. This plan will outline the methodologies to be employed for data acquisition, processing, and interpretation, ensuring the relevance and validity of results. The plan will provide details on the existing data source that the subrecipient will use. This plan will be finalized within the first month of the contract.
3. *Summary of Results:* The subrecipient will develop a summary of results detailing the outcome of the data analysis. This summary may take various forms including a written report, presentation, or other format to be approved by ASTHO and AUCD.
4. *Capacity-Building Product Creation*: The subrecipient will produce at least 1 capacity-building product designed to enhance the knowledge and expertise of stakeholders involved in disability and health matters during emergencies. This product may take various forms, such as webinars hosted on ASTHO Connects, training modules, blogs featured on ASTHO's platform, podcast episodes on ASTHO Experts, informative videos on ASTHO's channel, and well-structured reports or peer-reviewed manuscripts. The focus of these products will be on presenting key findings and outcomes derived from the data analysis, enabling informed decision-making and effective actions.
5. *Consultation and Collaboration with ASTHO, AUCD, and CDC:* Throughout the project lifecycle, the outcomes and deliverables will be developed in close consultation and collaboration with the Association of State and Territorial Health Officials (ASTHO), the Association of University Centers on Disabilities (AUCD), and the Centers for Disease Control and Prevention (CDC). These inputs and insights will be incorporated to align the final outputs with expectations and requirements.

**Inclusion of Health Equity**

ASTHO and AUCD are committed to the promotion of health equity and the elimination of health inequities. Health inequities are reflected by disproportionately high rates of disease, premature death, and a lower quality of life. Health inequities are avoidable, and state, federal, and locally funded activities play a key role in helping to solve this problem. Applicants are encouraged to address health inequities, particularly health equity for people with disabilities, within the context of proposed activities.

**Technical Support**

ASTHO and AUCD are available to provide information to the grantee at no additional cost. ASTHO and AUCD will provide any necessary technical support during the meetings (e.g., Zoom).

**Availability of Funds**

ASTHO and AUCD intend to award two (2) to three (3) subrecipients a grant of between $75,000 and $100,000 for the activities described in this RFP. The project duration will be from February 6, 2024, to July 31, 2024. All applications must be received by Tuesday, January 30, 2024, at 5:00 P.M. EST.

The selected applicant will be notified by Tuesday, January 30, 2024. The award will be made through a fixed-price agreement.

**Evaluators**

ASTHO and AUCD staff will evaluate proposals under this RFP. [PublicHealth@aucd.org](mailto:PublicHealth@aucd.org)

**III. Requirements for Financial Award**

**Allowable Expenses**

Funds may not be used for equipment purchases. Per HHS requirements, funds awarded under this RFP are prohibited from being used to pay the direct salary of an individual at a rate in excess of the federal Executive Schedule Level II (**currently $212,100**).

**Period of Performance**

The contract is scheduled to begin on February 6, 2024, and will end on July 31, 2024.

**Reporting Requirements**

Recipients will be required to attend monthly calls with ASTHO & AUCD staff. Final deliverables will be due July 31, 2024.

**IV. Required Proposal Content and Selection Criteria**

Applications will be reviewed and scored by ASTHO and AUCD based on the following criteria. Proposals should not exceed ten pages in length, excluding the cover letter, curricula vitae (CV), Memorandum of Understanding (MOU), and budget. They should be single-spaced in 11-point font.

1. **Cover Letter (5points)**:Include the names of the lead programmatic and fiscal/contractual contacts (name, address, e-mail, telephone number). Not to exceed one page but does not count toward the proposal page limit.
2. **Proposed Approach (15 points)**: Provide a brief outline of the approach and strategy to accomplishing the requested project activities. Detail a work plan that includes activities, timelines, goals, and milestones to achieve the deliverables and meet the expectations noted above.
3. **Plans for Analysis (10 points)**: Provide an attached 1-5 page document overviewing the proposed data for analysis and the researcher's approach and strategy to accomplishing data analysis. Include a detailed description of the existing data source, relevance to outlined objectives, and proposed research techniques employed to achieve the deliverables and meet the expectations noted above. This plan should include a minimum of the following: a proposed research question or hypothesis, an existing data source(s), description of the population or groups included, type of study proposed, and statistical methods to be used. Recipients are required to have access to the existing data source they propose to use for the analysis.
4. **Prior Experience and Performance (15 points)**: Describe experience and quality of performance on recent work completed with similar scope. Include information about familiarity with and understanding of the topic along with experience with people with disabilities and disability data. Describe the ability to represent ASTHO and AUCD well in interactions with state and territorial health agency staff and other governmental, private sector, and/or non-profit stakeholders.
5. **Organization/Individual Capacity (10 points)**: Include information about the company and address the ability and capacity to perform the services required within the specified timeframe. Describe staff qualifications and provide a CV for key personnel/staff lead*.* Capacity description should include current access to existing/proposed data resources and the ability to achieve project goals within the proposed timeline.
6. **Budget and Budget Narrative (10 points)**: Provide a detailed fixed price per deliverable budget, including detailed projected costs for the completion of the project. The fixed price budget should include a cost breakdown per task and a proposed payment schedule. The maximum award is $100,000. ***Attachment A*** outlines the general format in which the budget should be presented. Applicants may use Attachment A as a template or simply as a guide to inform the development of the project budget. A budget narrative must accompany the budget and indicate the costs associated with each proposed activity*.*
7. **Response to ASTHO Memorandum of Understanding (10 points)**: AUCD and the selected applicant will enter into a *fixed price* agreement.Memorandum of Understanding (MOU) is available in **Attachment B**. Applicants ***must review the ASTHO MOU with their legal team or contracts officer and confirm that if selected, they will enter into this agreement. A signed copy of the MOU must be submitted with your proposal application.* Any** **proposed changes** **must be identified and submitted with your application for negotiations**.

1. **Inclusion of Health Equity (10 points)**: Throughout the proposal, (1) describe the extent to which health disparities are evident within the health focus of the application, (2) identify the specific group(s) which experience a disproportionate burden of the health condition, and (3) demonstrate how proposed activities address health inequities (this also includes identifying social and/or environmental conditions which are the root causes of health disparities). The root causes of health inequities are sometimes referred to as social determinants of health. All information regarding health inequities must be supported with data.
2. **References (10 points)**: Attach at least one example of recent (within the last three years) work completed of similar scope and three current references we may contact.
3. **Status as Women-, Minority-, Disadvantaged-, Veteran-Owned, and/or Small Business (5 points):**Consideration will be given to applicants who demonstrate successful work with historically underserved and underrepresented entities (minority-, women-, disadvantaged-, and veteran-owned businesses or “MWDVBEs” and black, indigenous, people of color or “BIPOC”) in addressing health disparities*.* Applicants who classify as or partner with these businesses will be strongly considered.

**V. Submission Information**

**Application Procedure**

ASTHO and AUCD must receive applications by January 22, 2024, 5:00 pm EST. Please submit an electronic copy of the application toAUCD Staff at [PublicHealth@aucd.org](mailto:PublicHealth@aucd.org) with the subject line “RFP: Preparedness and Disability Integration Data Analysis.” Incomplete applications or applications received after the deadline will not be considered.

**Timeline**

* January 12, 2024: RFP released
* January 30, 2024, 5:00 pm EST: Deadline for submission of grant proposals
* February 6, 2024: Contract award announced
* February 6, 2024: Contract period commences
* April 15, 2024: Mid-project report due
* July 31, 2024: Final report due

**Applicant Questions and Guidance**

ASTHO and AUCD will support interested applicants with guidance and address specific questions about the RFP. Interested parties may contact AUCD staff via e-mail at [PublicHealth@aucd.org](mailto:PublicHealth@aucd.org) with the subject line “RFP: Disability Data Analysis.

**Disclaimer Notice:**

This RFP is not binding on ASTHO or AUCD, nor does it constitute a contractual offer. Without limiting the foregoing, ASTHO reserves the right, in its sole discretion, to reject any or all proposals; to modify, supplement, or cancel the RFP; to waive any deviation from the RFP; to negotiate regarding any proposal; and to negotiate final terms and conditions that may differ from those stated in the RFP. Under no circumstances shall ASTHO be liable for any costs incurred by any person in connection with the preparation and submission of a response to this RFP.