



MISSISSIPPI STATE DEPARTMENT OF HEALTH

REQUEST FOR PROPOSAL

Mississippi Delta Health Collaborative

Community Pharmacy Medication Therapy Management Program

Eligible Applicants: Community pharmacies in the following counties are eligible to apply:

Bolivar, Carroll, Coahoma, DeSoto, Holmes, Humphreys, Issaquena, Leflore, Panola, Quitman, Sharkey, Sunflower, Tallahatchie, Tate, Tunica, Warren, Washington, Yazoo

Preference will be given to community pharmacies that serve at-risk populations with demonstrated disparities in cardiovascular health/conditions (e.g., socioeconomic status, gender, geographic, racial/ethnicity).





MISSISSIPPI STATE DEPARTMENT OF HEALTH

REQUEST FOR PROPOSAL (RFP)

For

Community Pharmacy Partners

In the Mississippi Delta Region

To

Implement a Medication Therapy Management Program for

Populations with and at the Highest Risk of Hypertension and High Cholesterol

Within **Leflore, Sunflower, Washington, Desoto, Tunica, Tate, Carroll, Quitman, Tallahatchie, Bolivar, Humphreys, Sharkey, Issaquena, Warren, Yazoo, Panola, Coahoma, and Holmes** counties in the Mississippi Delta.

Offered by

Mississippi Delta Health Collaborative (MDHC)

522 West Park Avenue, Suite P

Greenwood, MS 38930

The Mississippi State Department of Health, Delta Health Collaborative is seeking proposals from qualified community pharmacies to provide Medication Therapy Management (MTM) services to the defined patient population. The goal of this RFP is to partner with community pharmacies that can deliver comprehensive MTM services to enhance medication adherence, optimize therapeutic outcomes, and improve overall patient health, particularly for those with and at the highest risk of hypertension and high cholesterol.

Request for Proposal Release Date: October 30, 2024

Technical Assistance Call: November 6, 2024

Request for Proposal Due: November 20, 2024

Notification Date: November 27, 2024

Estimated Budget Period: January 2, 2025 – September 29, 2029

Project Grant Period: September 30, 2024 – September 29, 2029

Overview: Cardiovascular disease (CVD) remains the leading cause of death both in Mississippi (MS) and the United States. In 2022, the age-adjusted CVD mortality rate in MS was 248.1 per 100,000, significantly exceeding the national rate of 164.0 per 100,000. Particularly, the Mississippi Delta region recorded an even higher rate of 250.4 per 100,000. Analyzing heart disease mortality rates in the Mississippi Delta (MS Delta) reveals persistent challenges in managing cardiovascular health.

The 18-county MS Delta, defined by the space between the Mississippi and Yazoo rivers, faces profound health challenges, marking it as a severely medically underserved area. Over 60% of its residents are African American, a demographic significantly impacted by health disparities. This region is a critical hotspot for health disparities and has been designated a medically underserved area by the Health Resources and Services Administration (HRSA) (HRSA, 2019). Through the Equity-Centered Approach, the MDHC operates to identify and mitigate the impact of heart disease and stroke by establishing community-clinical linkages that connect at-risk individuals to evidence-based programs, including Medication Therapy Management (MTM).

Not surprisingly, hypertension continues to be the most prevalent heart disease risk factor and accounts for over half of the deaths attributable to heart disease. Its high mortality risk, coupled with few identifiable “warning” signs or symptoms, has earned hypertension the reputation as the “silent killer” and has made it integral to most heart disease prevention efforts.

Strategic efforts to improve blood pressure control led the MDHC to partner with municipalities, barbershop/beauty salons, churches, public housing, healthcare systems, and community pharmacies. Community Health Workers (CHW) serve as an educator and advocate, linking patients to lifestyle change programs, social support services, MTM, and other resources to improve their overall health outcomes. Coupled with the invaluable service CHWs provide, careful coordination is required to eliminate organizational silos, increase access to health care, community resources, and services. Therefore, the MDHC established Regional CHW HUBs comprised of grantees to identify individuals at risk for hypertension through community screening programs and to ensure that individuals are linked to evidence-based interventions and services while addressing the social determinants of health. The MDHC Community Pharmacy MTM Program’s intent is to promote the adoption of MTM by community pharmacists and clinical providers to manage hypertension, high cholesterol, and lifestyle modification.

Purpose: The MDHC will select up to ten (10) community pharmacies to implement the MDHC Community Pharmacy MTM Program in one of the 18 Counties of the MS Delta Region.

1. Bolivar
2. Carroll
3. Coahoma
4. DeSoto
5. Holmes
6. Humphreys
7. Issaquena
8. Leflore
9. Panola
10. Quitman
11. Sharkey
12. Sunflower
13. Tallahatchie
14. Tate

15. Tunica
16. Warren
17. Washington
18. Yazoo

This is a competitive process open exclusively to community pharmacies meeting the eligibility criteria established by the MDHC. Successful applicants will work closely with MDHC staff. The purpose of this funding opportunity is to:

1. Increase the number of individuals who are screened for high blood pressure and associated risk factors such as nutrition, physical activity, and smoking status.
2. Increase the number of individuals with elevated blood pressure who are successfully linked to a healthcare provider for treatment.
3. Increase the number of individuals with high blood pressure who complete a blood pressure self-management education program.
4. Continue to implement systems to facilitate bi-directional referral, the information going from the health care system to the referred community program or resource; and the information returning from that program to the health care system.
5. Increase the use of MTM by community pharmacists and clinical providers to support the management of hypertension, high cholesterol, and lifestyle modification.
6. Deliver MTM to patients referred from participating healthcare systems, community partners, and your own community pharmacy staff.
7. Increase community clinical links to identify Social Determinants of Health (SDOH) and respond to individual social services and support needs within populations with and at the highest risk of hypertension and high cholesterol.

A. AVAILABILITY OF FUNDING

Awarding Agency: Mississippi State Department of Health

Awarding Program: Mississippi Delta Health Collaborative

Type of Award: Subgrant/Subaward

Approximate Number of Awards: 10

Application Due Date: November 20, 2024 @ 11:59 p.m.

Approximate Year 1 Budget Award: \$10,000

Federal Awarding Agency: Centers for Disease Control

Federal Award Identification Number: NU58DP007889

Federal Award Date: 09/30/2024 to 09/29/2029

Eligibility: Applicants must have sufficient financial resources available to meet program deadlines without advance payment from MSDH. MSDH will reimburse services and materials upon delivery and receipt of quarterly invoices.

Subsequently, applicants will participate in the MDHC HUB model engaging and partnering with municipalities, churches, public housing, barbershops, beauty salons, and healthcare systems funded by the MDHC and located in the following counties: Leflore, Sunflower, Washington, Desoto, Tunica, Tate, Carroll, Quitman, Tallahatchie, Bolivar, Humphreys, Sharkey, Issaquena, Warren, Yazoo, Panola, Coahoma, and Holmes.

This RFP is open to any potential community pharmacy/organization capable of performing the work described in the RFP and meeting the following qualifications:

1. Any **Mississippi-based** community pharmacy/organization that is eligible to operate within counties of the Mississippi Delta.
2. Be a licensed community pharmacy in good standing with the Mississippi Board of Pharmacy.
3. Have experience in providing MTM services to the target patient population.
4. Employ pharmacists with training in MTM who are willing to provide MTM services.
5. Demonstrate the ability to manage and document patient interactions effectively.
6. Have a proven track record of working collaboratively with healthcare providers.
7. Applicants must be sensitive to and knowledgeable in working and interacting with rural communities.

B. REQUIREMENTS

Successful applicants will enter a subgrant agreement with MSDH. In addition to the sub-grant agreement, completion of a W-9 Form, Business Associate Agreement, and Conflicts of Interest Form will be required. All grant recipients must have a Unique Entity Identifier number (UEI). This can be obtained by visiting www.Sam.gov.

Continued funding for the MDHC Community Pharmacy MTM Program will be contingent on meeting milestones, performance metrics, and outcomes that will be detailed in the contract with the selected applicant. Funds will be administered on ***reimbursement basis*** upon receipt of invoices and supporting documentation.

This funding opportunity was made possible by the Centers for Disease Control and Prevention, Federal Award Identification Number: NU58DP007889. The determination of continued funding is contingent upon the availability of funds and the grantee's ability to meet required deliverables and submit reports on time. This does not constitute a commitment by the MSDH MDHC to fund the entire project. All applicants must meet with the MDHC staff and program partners.

SCOPE OF WORK

C. ROLE OF THE COMMUNITY PHARMACY

The selected pharmacy will be responsible for providing the following MTM services:

- Comprehensive Medication Management (CMM): a patient-centered approach that optimizes medication use and improves patient health outcomes. It is delivered by a pharmacist working in collaboration with the patient and other healthcare providers. CMM ensures that each patient's medications are individually assessed for appropriateness, efficacy, safety, and ease of use.
- Conduct in-depth reviews of patient medication regimens to identify and resolve drug-related problems; Provide ongoing monitoring and follow-up for specific drug therapy issues.
- Patient Education: Educate patients on proper medication use, potential side effects, and adherence strategies.
- Coordination with Healthcare Providers: Collaborate with prescribers and other healthcare professionals to optimize patient therapy.
- Assess patients for social determinants of health and connect them to resources when appropriate, leveraging pharmacy technicians and support staff for assistance.

- Documentation: Maintain thorough and accurate records of all MTM services provided, including patient interactions, recommendations, and follow-ups.
- Reporting: Provide periodic reports on MTM activities, outcomes, and recommendations to MDHC.
- Attend required trainings and meetings (to include quarterly MTM Advisory Task Force meetings, Regional HUB meetings, and Mississippi Alliance for Cardiovascular Health (MACH) Learning Collaborative, etc.).

D. ROLE OF THE MISSISSIPPI DELTA HEALTH COLLABORATIVE

Mississippi Delta Health Collaborative responsibilities:

1. Provide MTM Coordinator to serve as project officer and provide ongoing technical assistance and support for each Community Pharmacy.
2. Provide training to each Community Pharmacy on program implementation.
3. Provide Community Pharmacy with other community and clinical partners' information along with local Community Health Worker and Community Outreach Manager information.
4. Process payment requests in a timely manner once all required documentation has been provided from the Community Pharmacy.

E. APPLICATION

THE APPLICATION LINK

[MTM Application \(ms.gov\)](#)



F. APPLICATION REVIEW CRITERIA

Organizational Capacity (45) – The extent to which the applicant:

- Describes the type of organization applying and its organizational structure. (20)
- Describes the services provided. (15)
- Describes the pharmacy's experience with MTM services. (10)

Project Management (30) – The extent to which the applicant:

- Describes who will be responsible for executing the MTM project critical tasks such as recruitment, conducting MTM sessions, patient follow up, monitoring of the project’s ongoing progress, preparation of reports, and communication with partners. (20)
- Describes the staff’s ability to participate in the MTM project, meetings, and reporting. (10)

Collaboration (20) – The extent to which the applicant:

- Describes how the community pharmacy utilizes team-based care to identify patients' social services and support needs and to improve the management and treatment of hypertension and cholesterol. (5)
- Describes the staff’s ability to provide clinical support within populations at the highest risk of hypertension. (5)
- Describes any history or evidence of collaboration with healthcare systems or community-based organizations and partnerships to address the barriers to social services and support needs. (5)
- Describes plans to engage stakeholders (e.g., local healthcare providers, patients) to enhance MTM service delivery. (5)

Project Resources (5) – The extent to which the applicant:

- Lists any potential faith-based organizations, community organizations, or healthcare systems that the community pharmacy will plan to partner with to conduct blood pressure screenings and referrals of local participants for MTM services. (2)
- Lists available resources to support the project, including adequate technology (pharmacy dispensing software, etc.) and supplies (blood pressure monitor and cuff, etc.). (1)
- Describes commitment to ongoing staff training and development related to MTM services. (2)

G. APPLICATION REVIEW PROCESS

Phase I Review: All eligible applications will be initially reviewed for completeness and responsiveness by an assigned review panel. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance to Phase II review. Applicants will be notified that the application did not meet eligibility and published submission requirements.

Phase II Review: An objective review panel will evaluate complete and responsive applications according to the criteria listed. Applicants will be notified electronically regarding the final status of the application.

Applicants may receive up to 100 possible points as follows:

Application Sections	Possible Points
Organizational Capacity	45
Project Management	30
Collaboration	20
Project Resources	5
Total Possible Points	100

H. SUBMISSION REQUIREMENTS

Please direct specific inquiries to the MS Delta Health Collaborative by email to Lindsey Williams, lindsey.williams@msdh.ms.gov or 769-209-3571. **All applications must be completed via the link on page 6 and received by 11:59 p.m. Wednesday, November 20, 2024.**

A technical assistance call is scheduled for **November 6, 2024, at 12:00 p.m. CST**, using the Zoom information below.

Join from PC, Mac, Linux, iOS or Android: <https://us06web.zoom.us/j/83194185898>

Or Telephone:

Dial:

USA 713 353 0212

Conference code: 140918

I. SUBMISSION DETAILS AND AWARD TIMELINE

1. Request for Proposal (RFP) released **October 30, 2024**
2. Proposals due by **11:59 p.m. CST on November 20, 2024.**
3. Applicants notified by phone and email on (or about) **November 27, 2024.**
4. Performance Period is **January 2, 2025, to September 29, 2029.**