

**State of Illinois Uniform Notice of Funding Opportunity (NOFO)  
Summary Information**

|                                       |  |
|---------------------------------------|--|
| Awarding Agency Name                  | Public Health  |
| Agency Contact                        | Sarahjini Nunn (sarahjini.r.nunn@illinois.gov)   |
| Announcement Type                     | Initial  |
| Type of Assistance Instrument         | Grant  |
| Funding Opportunity Number            | CACHWWF-25   |
| Funding Opportunity Title             | Campaign to Advance Community Health Worker Workforce in IL – Phase 1  |
| CSFA Number                           | 482-00-3535  |
| CSFA Popular Name                     | Campaign to Advance Community Health Worker Workforce in IL – Phase 1  |
| Anticipated Number of Awards          | 1  |
| Estimated Total Program Funding       | \$25,000   |
| Award Range                           | \$0 - \$25000  |
| Source of Funding                     | State  |
| Cost Sharing or Matching Requirements | No   |
| Indirect Costs Allowed                | Yes  |
| Restrictions on Indirect Costs        | No   |
| Posted Date                           | 02/10/2025   |
| Application Date Range                | 02/10/2025 - 03/17/2025 : 5.00pm   |
| Grant Application Link                | Please select the entire address below and paste it into the browser...<br><a href="https://idphgrants.com/user/home.aspx">https://idphgrants.com/user/home.aspx</a>                               |
| Technical Assistance Session          | Offered : Yes<br>Mandatory : Yes<br>Date : 02/14/2025 : 1pm<br>Registration link : <a href="https://illinois.webex.com/meet/CHW.Review.Board">https://illinois.webex.com/meet/CHW.Review.Board</a> |



**Uniform Notice of Funding Opportunity (NOFO)**

|     | Data Field   |   |
|-----|--|---|
| 1.  | <b>Awarding Agency Name:</b>   | Illinois Department of Public Health  |
| 2.  | <b>Agency Contact:</b>   | Name: Sarahjini Nunn<br>Phone: 217-785-4903 (desk) 217-720-0939 (work cell)<br>Email: Sarahjini.R.Nunn@illinois.gov   |
| 3.  | <b>Announcement Type:</b>  | <input checked="" type="checkbox"/> Initial announcement<br><input type="checkbox"/> Modification of a previous announcement  |
| 4.  | <b>Type of Assistance Instrument:</b>  | Grant   |
| 5.  | <b>Agency Opportunity Number:</b>  | CACHWWF-25  |
| 6.  | <b>Funding Opportunity Title:</b>  | Campaign to Advance the Community Health Worker Workforce in IL – Phase I   |
| 7.  | <b>CSFA Number:</b>  | 482-00-3535   |
| 8.  | <b>CSFA Popular Name:</b>  | Campaign to Advance the Community Health Worker Workforce in IL – Phase I   |
| 9.  | <b>CFDA Number(s):</b>   |   |
| 10. | <b>Number of Anticipated Awards:</b>   | 1   |
| 11. | <b>Estimated Total Funding Available:</b>  | Up to \$25,000  |
| 12. | <b>Single Award Range:</b>   | Up to \$25,000  |
| 13. | <b>Funding Source:</b><br>Mark all that apply  | <input type="checkbox"/> Federal or Federal pass-through<br><input checked="" type="checkbox"/> State<br><input type="checkbox"/> Private / other funding   |
| 14. | <b>Is Cost Sharing or Match Required?</b>  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |
| 15. | <b>Indirect Costs Allowed?</b><br><br><b>Restrictions on Indirect Costs?</b>                         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, provide the citation governing the restriction: |
| 16. | <b>Posted Date:</b>  | 2/10/2025   |
| 17. | <b>Application Date Range:</b><br>Leave the 'End Date' and 'End Time' empty if there is no deadline. | Start Date: 2/10/2025<br>End Date: 3/17/2025<br>End Time: 5:00pm central time   |

|     |                                      |   |
|-----|--------------------------------------|---|
| 18. | <b>Technical Assistance Session:</b> | Session Offered: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Session Mandatory: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Date and time:<br>February 14, 2025 at 1:00pm Central Time<br>Conference Info/Registration Link:<br><a href="https://illinois.webex.com/meet/CHW.Review.Board">https://illinois.webex.com/meet/CHW.Review.Board</a> |
|-----|--------------------------------------|---|

## Agency-specific Content for the Notice of Funding Opportunity

### A. Program Description

#### Background

Community health workers (CHWs) are widely recognized as essential to addressing disparities in health care delivery and outcomes among vulnerable populations. In the United States, the sustainability of this workforce is threatened by low wages, poor job security, and limited opportunities for training and advancement within the profession.

The Community Health Worker Certification and Reimbursement Act (410 ILCS 67) addresses these issues through the creation of the Community Health Worker Certification Program within the Illinois Department of Public Health (IDPH). The Certification Program aims to improve the quality and accessibility of CHW training programs in the state, improving readiness for certified CHWs to provide high quality services. Certification of CHWs will allow for reimbursement of CHW services through Medicaid and Medicare.

#### Purpose of Funding Opportunity

This notice of funding opportunity (NOFO) announces a grant application to fund a lead organization to develop a plan for a multi-year campaign to promote and advance the CHW workforce in Illinois (Phase I-Planning) for \$25,000.

Based on successful completion of Phase I, and availability of State funding, the lead organization will be awarded non-competitive continuation grants to implement the plan (Phase II-Implementation). These implementation grants will be awarded annually for no more than three years and for a total of up to approximately \$2,000,000.

#### Goals and Objectives of the Campaign Plan

This Phase I-Planning grant seeks a qualified lead organization to develop a Campaign Plan to achieve two complementary goals and their respective objectives.

The Phase I-Planning proposal must refine the preliminary objectives stated below and provide detailed information regarding the activities of the organization to successfully develop a comprehensive implementation plan for the campaign.

Goal 1: To increase workforce demand for CHWs and effective integration of CHWs in public health, health care, and human service organizations in Illinois.

Preliminary Objective 1a: To improve understanding of health and health care employers related to:

- the value of CHWs in community health and health care teams,
- the CHW certification program, and
- public financing for CHW services.\*

Preliminary Objective 1b: To improve the capacity of public health, health care, and human service organizations to effectively hire, supervise, and integrate CHWs into professional teams.

Goal 2: To increase the supply of a diverse and highly qualified CHW workforce throughout Illinois.

Preliminary Objective 2a: To increase awareness of the CHW certification program among current CHWs

Preliminary Objective 2b: To increase awareness of the CHW profession among prospective CHWs

Preliminary Objective 2c: To conduct an outreach program to recruit a diverse cadre of CHWs to enroll in certified training programs using targeted outreach. (For example, partnering with community-based organizations that serve populations that bear a disproportionate burden of poor health outcomes or have additional challenges accessing health care and human services.)

\*This NOFO calls for awareness of and linkage to any efforts of the Department of Healthcare and Family Services to assist providers in billing; it does not call for a separate and distinct effort related to assisting providers with billing.

Applicants may propose additional objectives and activities that align with the purpose and goals of the opportunity.

Considerations: Engage key stakeholders for input into the plan. Assess potential partnerships with organizations and/or contractors well positioned to contribute to this work.

### **Phase I-Planning Deliverable: Campaign Plan**

The campaign plan will include the following components.

- a. Description of strategies and methodologies to be employed to ensure the greatest impact and reach to relevant populations throughout Illinois.
- b. Effective and clearly defined objectives which outline multi-year project deliverables. We request applicants refine project objectives in the NOFO to ensure they are specific, measurable, attainable, realistic, timely, inclusive, and equitable. For example, include number of relevant organizations to be reached, number of media sources to be leveraged.
- c. Detailed activities proposed to achieve each objective.
- d. Workplan with projected timeline for major deliverables and milestones for three-year project (detailed for Year 1, higher level for Years 2 and 3).
- e. List any other partner organization or sub-contractor that will be partnering with the applicant on this project (e.g., community-based organizations, statewide associations, communications consulting firms), their roles, and specific deliverables for which they will be responsible.
- f. Three-year budget and budget narrative (detailed for Year 1, higher level for Years 2 and 3.)
- g. Description of the potential risks or barriers associated with implementing the project and a plan to address these concerns.
- h. Description of the extent to which the project or outcomes will be sustained after funding concludes.

The Illinois Department of Public Health places health equity as a top priority. Health equity is the “basic principle of public health that all people have a right to health”. Health equity exists when all people can

achieve comprehensive health and wellness despite their social position or any other social factors/determinants of health. Most health disparities affect groups marginalized because of socioeconomic status, race/ethnicity, sexual orientation, gender, disability status, geographic location, or some combination of these. People in such groups not only experience worse health but also tend to have less access to the social determinants or conditions (e.g., healthy food, good housing, good education, safe neighborhoods, disability access and supports, freedom from racism and other forms of discrimination) that support health.... Health disparities are referred to as health inequities when they are the result of the systematic and unjust distribution of these critical conditions. The department's efforts are committed to addressing health through an equity lens by empowering communities who have been historically marginalized and developing intervention strategies with the end goal of furthering health equity among all Illinoisans.

## B. Funding Information

This award is utilizing  federal pass-through,  state and/or  private funds.

State of Illinois General Revenue Funds allocated to the Community Health Worker Certification Program.

## C. Eligibility Information

Regardless of the source of funding (federal pass-through or State), all grantees are required to register with the State of Illinois through the Grant Accountability and Transparency Act (GATA) website, <https://gata.illinois.gov/>, complete a prequalification process, and be determined "qualified" as described in Section 7000.70. Registration and prequalification is required before an organization can apply for an award.

The entity is "qualified" to be an awardee if it:

1. has an active UEI (Unique Identity ID) number;
2. has an active SAM.gov account;
3. has an acceptable fiscal condition;
4. is in good standing with the Illinois Secretary of State, if the Illinois Secretary of State requires the entity's organization type to be registered. Governmental entities, school districts and select religious organizations are not required to be registered with the Illinois Secretary of State. Refer to the Illinois Secretary of State Business Services website: [http://www.cyberdriveillinois.com/departments/business\\_services/home.html](http://www.cyberdriveillinois.com/departments/business_services/home.html);
5. is not on the Illinois Stop Payment List;
6. is not on the SAM.gov Exclusion List;
7. is not on the Sanctioned Party List maintained by HFS.

### 1. Eligible Applicants

Funds may be granted to any entity for proper use to support approved activities. Applicants must be:

- 1) Qualified and capable of achieving project goals, refining objectives to ensure they are measurable, and proposing and carrying out activities that will achieve objectives.
- 2) Preference for not-for-profit organizations with statewide reach.
- 3) Preference for organizations with direct experience related to this scope of work in Illinois.
- 4) Willing to serve as lead organization and leverage partner relationships to achieve goals and objectives.
- 5) Demonstrated experience managing large budgets and sub-contracts.

Examples of eligible lead organizations include but are not limited to: Statewide associations;

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universities or colleges; health systems, social service organizations, community-based organizations with broad reach and infrastructure necessary to manage large grants and sub-contracts.

**2. Cost Sharing or Matching**

None

**3. Indirect Cost Rate**

Annually, each organization receiving an award from a State grantmaking agency is required to enter the centralized Indirect Cost Rate System and make one of the following elections for indirect costs to State and federal pass-through grants:

- I. Federal Negotiated Indirect Cost Rate Agreement (NICRA);
- II. Election of the de minimis rate of 10% of MTDC;
- III. Election not to charge indirect costs; or
- IV. Negotiate an indirect cost rate with the State of Illinois.

The awardee shall make one election or negotiate a rate that all State agencies must accept unless there are federal or State program limitations, caps or supplanting issues.

**4. Other, if applicable**

**D. Application and Submission Information**

**1. Address to Request Application Package**

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at [idphgrants.com](http://idphgrants.com).

Since high-speed internet access is not yet universally available for downloading documents or accessing the electronic application, and applicants may have additional accessibility requirements, applicants may request paper copies of materials by contacting:

Sarahjini Nunn, CHW Certification Program Manager  
Illinois Department of Public Health  
535 West Jefferson St.  
Springfield, IL 62761  
217-785-4903 (desk) 217-720-0939 (work cell)  
[Sarahjini.R.Nunn@illinois.gov](mailto:Sarahjini.R.Nunn@illinois.gov)

**2. Content and Form of Application Submission**

The application format is provided via EGrAMS as mandated for all Illinois Department of Public Health Grants. The application must be completed in its entirety. All required documents must be submitted via the IDPH online grant management system.

**The applicant must submit a project plan that describes how the Phase I-Planning grant will be executed.**

The project plan must include necessary detail to enable IDPH to manage the grant agreement activity against planned project performance.

The Phase I-Planning grant application shall include information on the following.

### **1. Understanding Need and Scope of Work (10 points)**

- a. Describe project need and understanding of the full scope of work expected to be supported by a multi-year contract. Distinguish Phase I activities from Phase II activities.

### **2. Organizational Capacity and Endorsements (20 points)**

- a. Describe the lead applicant's organizational capacity including geographic service area/s.
- b. Describe relevant experience of the lead applicant's organization in planning and implementing campaigns that include both communications and technical assistance related to advancing the CHW workforce or another health profession.
- c. Name a project director and project manager from the lead applicant organization responsible for Phase I-Planning. Provide a bio that describes relevant capabilities and a curriculum vitae for each position.
- d. Provide 3 letters of endorsement for the organization and proposed team to serve as lead entity for this scope of work.

### **3. Project Planning Approach and Workplan (25 points)**

- a. Describe the applicant's approach to Phase I-Planning to produce the multi-year, multi-part Campaign Plan deliverable outlined in the Program Description, Section A.
- b. IDPH encourages the lead applicant to partner with one or more organizations with relevant expertise to complement and/or extend the activities of the lead applicant in meeting project goals. Describe the applicant's approach to engaging potential partners, contractors, and stakeholders throughout the state in project plan development.
- c. How the applicant will leverage existing efforts, tools, resources, and networks to achieve project goals.
- d. Include a workplan detailing Phase I-Planning activities to develop the Campaign Plan deliverable.

### **4. Budget (5 points)**

a. Provide a detailed line-item budget for Phase I- Planning. Applicants must provide a detailed line-item budget for no more than a total of \$25,000 from project award through June 30, 2025. Applicants must use a budget template provided by IDPH to outline specific cost requirements within each of the following budget categories:

- i. Personnel. An employee of the organization whose work is tied to the proposed project.
- ii. Travel. Provide mileage, lodging and per diem as applicable (travel costs should follow all state travel guidelines).
- iii. Supplies. Tangible personal property needed for the proposed project.
- iv. Contractual. The cost of project activities to be undertaken by a third-party contractor/s. Each contractor should be budgeted separately.
- v. Telecommunications. Expenditures incurred for the lease, rent, or purchase of telecommunications interconnection facility equipment, supplies, and maintenance.
- vi. Training and Education. For employee development related to proposed project.



- vii. Total indirect costs. Overhead costs allocable to the project.
- b. Develop a brief budget narrative. The budget narrative must:
  - i. Explain the costs calculation and methodology, and
  - ii. Justify the indirect costs included in the detailed line-item budget.

**5. Project Management (5 points)**

- a. Describe the applicant's approach to project management and performance monitoring.
  - i. Include how the applicant will engage with IDPH including regular meetings and the opportunity for IDPH staff to provide feedback on draft Campaign Plan deliverable and budget.
  - ii. Include how the applicant will ensure comprehensive and timely progress and financial reports requested by IDPH.

**6. Health Equity (35 points)**

- a. Health Equity Definition
- b. Incorporate key Definitions from IDPH Health Equity Checklist
- c. Culturally and Linguistically Appropriate Services
- d. Focus on SDOH

**3. Unique Entity Identifier (UEI) and System for Award Management (SAM)**

Each applicant, unless the applicant is an individual or Federal or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)), is required to:

- i. Be registered in SAM before submitting its application. If you are not registered in SAM, this link provides a connection for SAM registration: <https://sam.gov/SAM/>
- ii. provide a valid UEI in its application; and
- iii. continue to maintain an active SAM registration with current information at all times during which it has an active Federal, Federal pass-through or State award or an application or plan under consideration by a Federal or State awarding agency.

The State awarding agency may not make a Federal pass-through or State award to an applicant until the applicant has complied with all applicable UEI and SAM requirements and, if an applicant has not fully complied with the requirements by the time the State awarding agency is ready to make a Federal pass-through or State award, the State awarding agency may determine that the applicant is not qualified to receive a Federal pass-through or State award and use that determination as a basis for making a Federal pass-through or State award to another applicant.

**4. Submission Dates and Times**

See 17 on Page 1 of this NOFO.

The work will occur between the execution of the grant agreement (approximately May 1, 2025), ending **June 30, 2025**, 11:59pm. The awardee has until July 30, 2025 to submit the final deliverable and financial report.

**5. Intergovernmental Review, if applicable**

N/A

## 6. **Funding Restrictions**

All grant funds must be used for the sole purposes set forth in the grant proposal and application and must be used in compliance with all applicable laws. Grant funds may not be used as matching funds for any other grant program unless specifically allowed under grant program guidelines. Use of grant funds for prohibited purposes may result in loss of grant award and/or place the grantee at risk for repayment of those funds used for the prohibited purpose. Regardless of the source of funding (federal pass-through or State), all grant-funded expenses must be compliant with Cost Principles under Subpart E of 2CFR200 unless an exception is noted in federal or State statutes or regulations.

### **Allowability**

**Allowable** – All grant funds must be used for items that are necessary and reasonable for the proper and efficient performance of the grant and may only be used for the purposes stated in the grant agreement, work plan, and budget. Items must comply with all applicable state and federal regulations.

**Allocable** – Grant-funded costs must be chargeable or assignable to the grant in accordance with relative benefits received. The allocation methodology should be documented and should be consistent across funding sources for similar costs.

**Reasonable** – The amounts charged for any item must be reasonable. That means the nature and amount of the expense does not exceed what a prudent person under the same circumstances would expend; and that the items are generally recognized as ordinary and necessary for the performance of the grant.

### **Allowed Uses**

Funding may be used for the following:

All grant funds must be used for the sole purposes set forth in the grant proposal and application and must be used in compliance with all applicable laws. Grant funds may not be used as matching funds for any other grant program. Use of grant funds for prohibited purposes may result in loss of grant award and/or place the grantee at risk for recouping of those funds used for the prohibited purpose. Expenditure reports must be submitted monthly. To be reimbursable under the IDPH/Office of Health Promotion Grant Agreement, expenditures must meet the following general criteria:

- Be necessary and reasonable for proper and efficient administration of the program and not be a general expense required to carry out the overall responsibilities of the applicant.
- Be authorized or not prohibited under federal, state or local laws, or regulations.
- Conform to any limitations or exclusions set forth in the applicable rules, program description, or grant agreement.
- Be accorded consistent treatment through application of generally accepted accounting principles, appropriate to the circumstances.
- Not be allocable to or included as a cost of any state or federally-financed program in either the current or a prior period.
- Be net of all applicable credits.
- Be specifically identified with the provision of a direct service or program activity.
- Be an actual expenditure of funds in support of program activities, documented by check number, and/or internal ledger transfer of funds.
- Not be used for research or clinical care.

NOTE: Applicant should prepare a budget that reflects expenses for the grant term. Use whole numbers and round to the nearest dollar. Using the forms provided in this packet, submit additional information or justification as required in the allowable costs list section. Specific line items listed in the detailed budget must be explained on the budget forms. The grantee may divide employee work time among multiple staff directly

involved in the Plan development, implementation, and evaluation. The allocation of employee work time in the budget must reflect and be commensurate with activities attributed to the specific staff in the approved Scope of Work Plan. Program staff members funded 100% from the grant are expected to work solely on this grant program and may not be funded by other IDPH grant programs. Use the Personnel Loading Chart found in the appendix to detail staff.

If the grantee is anticipating the use of sub-contractors/sub-grantees, those should be listed under the Contractual Costs section of the Budget Detail Template and the Contractual Services section of the grant application. For such sub-contractors and/or sub-grantees, justification should be of sufficient detail to document the items requested are essential to the achievement of the work plan activities. Complete Subcontractor Table found in the appendix to provide information for each subcontractor that will be used to provide services under this grant. If a vendor is to be determined, indicate so on the table. Contractual Services are costs such as contractual employees, repair and maintenance of equipment, media development and placement, software for support of program objectives, among other costs. Payments (or pass-through) to subcontractors are to be shown in the Contractual Services section of the application (Section 5) as well as in the Budget Detail section.

The grantee acknowledges they must expend funds in accordance with the budget approved by IDPH and in line with the line-item categorical amounts approved in that budget. Twenty-five percent (25%) of the grant amount shall be distributed upon execution. The grantee is required to submit monthly documentation of actual expenditures incurred for conducting activities through use of IDPH's reimbursement certification form. If changes in line items of the approved budget are necessary, the grantee must submit a Budget Adjustment Request in writing on IDPH forms for approval by IDPH prior to making any of the requested expenditure changes. Documentation of actual expenditures incurred for the grant period must be submitted within 15 days after the close of the grant period (Friday, June 30, 2025). Any funds not documented and approved by IDPH must be returned to IDPH.

**Allowable costs.** Examples of allowable costs are listed below. This is not meant to be a complete list, but rather specific examples of items within each line-item category.

**Personal Services:**

- Gross salaries paid to agency employees directly involved in the provision of program services. All salaries to be provided as in-kind need to be documented and noted on the budget sheet as such.
- Employer's portion of fringe benefits actually paid on behalf of direct services employees. Examples include FICA (Social Security), life/health insurance, workers compensation insurance, unemployment insurance and pension/retirement benefits.

**Contractual Services:**

- Contractual employees (requires prior program approval).
- Postage, postal services, overnight mailing, or other carrier costs.
- Photocopies. If paid to a duplicating business, list the number of copies and costs. If charged by copy on a leased photocopy machine, list cost per actual copy.
- Telecommunications. Allowable charges are monthly telephone service costs for land lines and installation, repair, parts and maintenance of telephones and other communication equipment.
- Payments or pass-throughs to subcontractors or sub grantees are to be shown in the Contractual Services section. All subcontracts or sub grants require an attached detail line-item budget supporting the contractual amount.
- Printing. Any printing job, e.g., letterpress, offset printing, binding, lithographing services, must be requested as a prior approval item in the budget submission. This expense requires substantive documentation as to its

relevance to the work plan before approval will be granted. The cost of the printing may not exceed \$1,000 or 5 percent of the total budget, whichever is less.

- Auto travel mileage at no higher than \$0.70 per mile - the state reimbursement rate as of January 1, 2025.
- Rail transportation expenses.
- Lodging. The rate must be in accordance with Illinois Travel Control Board rates or justification must be provided.
- Per Diem.

**Supplies:**

- Office supplies.
- Educational and instructional materials and supplies, including booklets and reprinted pamphlets. The budget narrative must describe the connection between the purchase of these materials and approved work plan before it will be approved.
- Paper supplies.
- Envelopes and letterhead.

**Prior Approval ONLY**

With prior approval, funding may be used for the following:

N/A

**Funding Use Prohibitions**

Funding may NOT be used for the following:

**Unallowable Cost List.** Unallowable or prohibited uses of grant funds include, but are not limited, to the following:

- Political or religious purposes.
- Contributions or donations.
- Incentives, including but not limited to t-shirts, bags, backpacks, hats, pencils, rulers, coloring books, stress balls, band-aid holders, mugs, and cookware.
- Fundraising or legislative lobbying expenses.
- Payment of bad or non-program related debts, fines, or penalties.
- Contribution to a contingency fund or provision for unforeseen events.
- Food, alcoholic beverages, gratuities or entertainment.
- Membership fees.
- Interest or financial payments or other fines or penalties.
- Purchase or improvement of land or purchase, improvement, or construction of a building.
- Lease of facility space.
- Any expenditure that may create conflict of interest or the perception of impropriety.
- Audit expenses.
- Equipment.
- Prescription drugs.
- Exhibit fees.
- Subscriptions.
- Association dues.
- Out-of-state travel.
- Airfare.

## **Additional Funding Guidance**

N/A

### **7. Other Submission Requirements**

Applications must be submitted through the Illinois Department of Public Health Electronic Grants Administration & Management System (EGrAMS) accessible at idphgrants.com. Applications must be received by March 17, 2025 at 5:00pm. If the applicant encounters technical difficulties with the EGrAMS system, the applicant may contact: IDPH Grants Support E-mail: DPH.GrantReview@illinois.gov.

### **E. Application Review Information**

Applications will be reviewed for content, work plan activities, budget proposals, and required application supplemental material.

The **Health Equity Checklist** is a scored portion of the IDPH grant application. In public health, health equity is the opportunity for everyone to reach their full health potential, regardless of any social determined circumstance. There are seven questions worth 35 points.

#### **1. Criteria**

Applications will be reviewed and graded based on a 100-point scoring rubric. The categories are as follows:

a. **Understanding Need and Scope of Work (10 points)** - Describe project need and understanding of the full scope of work expected to be supported by a multi-year contract. Distinguish Phase I activities from Phase II activities.

b. **Organizational Capacity, Proposed Team, Experience, Endorsements (20 points)** – Describe organizational capacity and relevant experience; proposed project director and project manager with bios and CVs; three letters of endorsement.

c. **Project Planning Approach and Workplan (25 points)** – Project planning approach and detailed workplan to achieve planning deliverable. Identify partners, tools, materials, networks, contractors that can be leveraged to achieve goals and objectives.

d. **Budget Section (5 points)** - Budget is reasonable and justified in budget narrative.

e. **Project Management (5 points)** – Approach to project management; performance monitoring; progress and financial reporting.

f. **Healthy Equity (35 points)** – Address all components of the Health Equity Checklist.

### **Health-Equity Based Review**

A significant portion of the application review will be based on how the application abides with the following areas:

- A. Addressing all components of the IDPH Health Equity Checklist
- B. Reference the Health Equity Definition
- C. Incorporation of key definitions from the IDPH Health Equity Checklist
- D. Reference to culturally and linguistically appropriate services
- E. Focus on the Social Determinants of Health

### **Health Equity Checklist**

Applying this checklist to all IDPH grant applications will assist and guide applicants to review their existing practices and provide a structure for them to modify their practices in a way that promotes

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health equity. The Health Equity Checklist walks entities through considerations for assessing health equity by posing 7 questions and action steps to engage disparately impacted populations and to assess the short and long-term impacts of health inequities within these communities.

The Health Equity Checklist is worth **35 points** unless otherwise noted above.

### **Health Equity Definition**

The proposed program should aim to reduce health disparities and health inequities where they exist. Differences in the incidence and prevalence of health conditions and health status between groups are commonly referred to as **health disparities**. **Health equity**, then, as understood in public health literature and practice, is when everyone has the opportunity to ‘attain their full health potential’ and no one is ‘disadvantaged from achieving this potential because of their social position or other socially determined circumstance.’<sup>1</sup> This definition is taken from IDPH’s Health Equity Checklist. Given that social disparities are rooted in institutional structuring, quality and controls of the underlying infrastructure and resource sectors that support the community members, it is imperative that participating entities engage in a structured inquiry that identifies unmet social determinants of health that communities of color are enmeshed within which have resulted in population-based disparities. Understanding health equity is essential for all participating agencies to engaged in intervention strategies, reflect on social determinants of health, and promote health equity in research, development, practice, and evaluation.

### **Incorporation of Key Definitions from IDPH Health Equity Checklist**

The Health Equity Checklist from IDPH includes key terminology to incorporate. These terms will help guide the awardees in developing strategies that are shared across other public health organizations. These key definitions address health inequities in research and practice. Incorporating health equity terms into the lexicon will not only improve communications between communities but will also help engage diverse stakeholders. This is a step towards shifting the paradigm on how to approach and view health. Please address the Health Equity checklist as a referral to terms that are used most frequently to discuss health disparities, health equity and minority health The detailed list of the key definitions can be found in the [Health Equity Checklist](#).

For more information on Health Equity terminology from the Association of State and Territorial Health Officials (ASTHO).<sup>2</sup>

### **Culturally and Linguistically Appropriate Services**

Due to the diversity of Illinois residents, there must be an aim to implement the National Standards for Culturally and Linguistically Appropriate Services (National CLAS Standards) set by the Department of Health and Human Services.<sup>3</sup> The National CLAS Standards is intended to improve health outcomes, advance healthcare quality and eliminate health inequities. In order to address current and past discrimination, maltreatment, and cultural barriers, the programs should strive to ensure that all services and resources are provided in a manner that is equitable to the underserved, underrepresented, socially disadvantaged due to race, ethnicity, sexual or gender identity, and/or disability. All activities and interventions should be designed to align with the health equity framework.

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<sup>1</sup> Illinois Department of Public Health. (2020). Health Equity Checklist. Retrieved from [https://docs.google.com/document/d/1GZTg7\\_RdnC8XRahQ1trcLTnsHD6k5OAX6Pbg1LUk7qI/edit?usp=sharing](https://docs.google.com/document/d/1GZTg7_RdnC8XRahQ1trcLTnsHD6k5OAX6Pbg1LUk7qI/edit?usp=sharing)

<sup>2</sup> Association of State and Territorial Health Officials (ASTHO). (2018). Guidance for Integrating Health Equity Language Into Funding Announcements February 2018. Retrieved from <https://www.astho.org/Health-Equity/Guidance-for-Integrating-Health-Equity-Language-Into-Funding-Announcements/>

<sup>3</sup> U.S. Department of Health and Human Services. (2018). The National CLAS Standards. Retrieved from <https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>

## **Focus on Social Determinants of Health**

The program must address the Social Determinants of Health. Social Determinants of health are the conditions where people are born, live, learn, work, play and worship. The reality of these conditions and the distribution of life-enhancing resources have major impacts on the health, longevity, and the quality of life for Illinois residents. Efforts in addressing social determinants of health will provide a health equity framework for program development.<sup>4</sup> In addition, there must be a focus on health through collaboration with Non-Health Sectors.

### **2. Review and Selection Process**

This grant is competitive. Multiple reviewers will assess the application and score based on the evaluation criteria listed above. IDPH has the discretion to prioritize applications based on considerations such as lead organization's ability to reach provider organizations and CHWs throughout Illinois, strategic alliances relevant to goals and objectives, the ability to leverage existing resources to improve efficiency.

Applicants must use the health equity checklist questions to identify both the short and long-term impacts to health equity, health inequalities and health inequities of the proposed intervention strategy.

#### Merit-Based Review Appeal Process

For competitive grants, only the evaluation process is subject to appeal. Evaluation scores or funding determinations/outcomes may not be contested and will not be considered by the Department's Appeals Review Officer.

To submit an appeal, the appealing party must:

- Submit the appeal in writing and in accordance with the grant application document through IDPH's Merit-Based Review Appeal Request Form available here: <https://app.smartsheet.com/b/form/ed4d113385de41feb38964a8005ce72b>
- Appeals must be received within 14 calendar days after the date that the grant award notice was published.
- Appeals must include the following information:
  - The name and address of the appealing party
  - Identification of the grant
  - A statement of reasons for the appeal
  - If applicable, documents or exhibits to support statement of reason

The IDPH Appeals Review Officer (ARO) will consider the grant-related appeals and make a recommendation to the appropriate Deputy Director as expeditiously as possible after receiving all relevant, requested information.

- The ARO must review the submitted Appeal Request Form for completeness and acknowledge receipt of the appeal within 14 calendar days from the date the appeal was received.
- The ARO will utilize an Appeal Review Tool to consider the integrity of the competitive grant process and the impact of the recommendation.
- The appealing party must supply any additional information requested by the agency within the time period set in the request.
- The ARO shall respond to the appeal within 60 days or supply a written explanation to the

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<sup>4</sup> U.S. Department of Health and Human Services. (2020). Social Determinants of Health. Retrieved from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

appealing party as to why additional time is required.

Documentation of the appeal determination shall be sent to the appealing party and must include the following:

- Standard description of the appeal review process and criteria
- Review of the appeal
- Appeal determination
- Rationale for the determination
- In addition to providing the written determination, the grant-making office may do the following:
  - Document improvements to the evaluation process given the findings and re-review all submitted applications.
  - Document improvements to the evaluation process given the findings and implement improvements into the following year's grant evaluation process.
- Provide written notice to the appealing party as to how the identified actions will be remedied.

Appeals resolutions may be deferred pending a judicial or administrative determination when actions concerning the appeal have commenced in a court of administrative body.

**3. *Anticipated Announcement and State Award Dates, if applicable.***

Anticipated date of award announcement is April 7, 2025

Anticipated Announcement Date (if known): 4/7/2025  
Anticipated Program Start Date: 5/1/2025  
Anticipated Program End Date: 6/30/2025

**F. Award Administration Information**

**1. *State Award Notices***

Anticipated date of award notice is April 7, 2025.

A Notice of State Award (NOSA) shall be issued to the finalists who have successfully completed all grant award requirements and have been selected to receive grant funding. The NOSA will specify the funding terms and specific conditions resulting from applicable pre-award risk assessments.

The Illinois Department of Public Health (IDPH) is exempt from utilizing the standard NOSA issued on the GATA Grantee Portal. Successful applicants will receive an email notification from EGrAMS and must review the funding terms and specific conditions in the grant agreement and accept utilizing an electronically signature. Both the electronic signature in EGrAMS and a physical signature on the grant agreement must be completed by an authorized representative of the grantee organization and submitted to IDPH.

A Notice of Denial shall be sent to the applicants not receiving awards via EGrAMS.



## **2. Administrative and National Policy Requirements**

Not Applicable.

All grantees receiving one or more federally-funded subawards from IDPH equal to or greater than \$30,000 must provide compensation information within EGrAMS prior to issuance of an award. Grantees will not be able to sign grant agreements or amendment agreements until this requirement is complete. Annual completion of this requirement is necessary for multiyear grants.

## **3. Reporting**

See Uniform Grant Agreement (UGA).

### **G. State Awarding Agency Contact(s)**

Illinois Department of Public Health, Office of Health Promotion

### **H. Other Information, if applicable**

The State of Illinois is not obligated to make any State award as a result of the announcement, and funding is contingent upon approval and receipt of State appropriation.

#### **Other webpages:**

Grant Accountability and Transparency Act (GATA) Grantee Portal - <http://www.grants.illinois.gov>

Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management (SAM) - <https://governmentcontractregistration.com/sam-registration.asp>

Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS) - [dphgrants.com](http://dphgrants.com).

EGrAMS Help Desk: [DPH.GrantReview@illinois.gov](mailto:DPH.GrantReview@illinois.gov).

### **Mandatory Forms -- Required for All Agencies**

- 1. Uniform State Grant Application – Available at [idphgrants.com](http://idphgrants.com) for eligible applicants**
- 2. New to EGrAMS, click [HERE](#) to see how to Get Started**
- 3. Project Narrative (included in EGrAMS application)**
- 4. Budget (included in EGrAMS application)**
- 5. Budget Narrative (included in EGrAMS application)**

Other program-specific mandatory forms:

1. Project Director and Project Manager bios and CVs
2. Three letters of endorsement.