



Request for Proposal

National Hypertension Control Roundtable Strategic Planning

SUMMARY OF REQUEST

Through this Request for Proposal (RFP), the CDC Foundation is seeking expertise and assistance in facilitating strategic planning for the National Hypertension Control Roundtable (NHCR). This includes working with the Steering Committee to develop a draft plan and gathering feedback on the draft from the broader membership. With a focus on equity, the strategic planning should include facilitation and group discussion on addressing disparities in hypertension awareness, prevalence and control rates.

BACKGROUND AND NEED

Hypertension, also known as high blood pressure, poses a serious and significant public health risk to our society. Affecting one in three U.S. adults, current data indicate that hypertension rates are increasing among young adults. Furthermore, hypertension contributes to one in seven cardiovascular-related deaths, and the cost to the U.S. annually is \$51 billion, including \$47.5 billion in medical expenditures¹. High blood pressure is more common in non-Hispanic black adults (54%) than in non-Hispanic white adults (46%), non-Hispanic Asian adults (39%), or Hispanic adults (36%)³.

The stagnation in hypertension control rates nationally and the growing number of young people with hypertension pose a serious risk to the nation's health and security. Congruently, having cardiovascular or cerebrovascular disease, such as hypertension or stroke, might increase the risk of severe illness from COVID-19². Thus, efforts continue to support hypertension control progress through traditional state and local public health partners are not enough.

The CDC Foundation and the National Association of Chronic Disease Directors (NACDD) are partnering to support the NHCR, which includes public, private, and nonprofit organizations unified to improve national hypertension control rates from about 50% today to at least 80% by 2025. It strives to spotlight the need for improved hypertension control in the United States through an active multisector commitment to eliminate disparities and advance innovative strategies.

¹Estimated Hypertension Prevalence, Treatment, and Control Among U.S. Adults <https://millionhearts.hhs.gov/data-reports/hypertension-prevalence.html>

²People With Certain Conditions <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

³Centers for Disease Control and Prevention (CDC). [Hypertension Cascade: Hypertension Prevalence, Treatment and Control Estimates Among US Adults Aged 18 Years and Older Applying the Criteria From the American College of Cardiology and American Heart Association's 2017 Hypertension Guideline—NHANES 2013–2016external icon](#). Atlanta, GA: US Department of Health and Human Services; 2019.

The NHCR has identified the following strategies to address hypertension control:

1. **Public awareness:** Coordinate consistent communication efforts that increase awareness about the importance of blood pressure control and promote strategies to increase hypertension control rates nationally through multiple channels.
2. **Provider Engagement:** Promote, create, and disseminate evidence-based hypertension guidelines, tools and resources that can improve clinician practices.
3. **Payer Coverage:** Promote the development, implementation, and evaluation of health benefit designs that support improved hypertension screening and control while balancing cost and quality.
4. **Public Policy:** Advance policy that can help improve hypertension screening and control rates nationally.
5. **Community-Clinical Linkages:** Engage community partners in supporting implementation of best practices for hypertension control across states and communities.

Action Teams will be formed in these areas to provide expertise on best practices, share resources on up-to-date hypertension policies and influence the mission of reaching 80% control by 2025.

SCOPE

The selected vendor will do the following:

- Facilitate the development of the NHCR strategic plan framework with input from the Steering Committee as well as the CDC Foundation and NACDD staff.
- Assist the CDC Foundation and NACDD in planning for a NHCR virtual convening through which input on the strategic framework will be gathered.
- Develop templates to focus and capture virtual convening breakout group discussion to generate targeted discussion on key topics.
- Assist with the use of virtual technical tools during the meeting, as appropriate.
- Train facilitators to introduce and moderate the strategic plan focus of the breakout groups.
- Synthesize breakout discussion output, incorporating into the strategic plan.
- Help identify next steps and actions the CDC Foundation, NACDD and workgroups can take to keep the momentum post-event.
- Provide ongoing communication and maintain regular meetings with the CDC Foundation and NACDD staff.
- Provide facilitation support and lead discussion on sharing strategies for reaching populations experiencing health disparities.

The organization will be evaluated on its ability to deliver on the existing strategy and contribute creativity, depth, and innovative solutions to the initiative.

TASKS

The awardee organization will be required to:

1. Assist the NHCR Steering Committee in developing short- and long-term objectives to meet its goal of improving national hypertension control rates to 80%.
2. Create a process for gathering input on objectives from key stakeholders.
3. Ensure stakeholders represent populations experiencing health disparities.
4. Develop guides to support SWOT analysis by Action Teams and/or Steering Committee.
5. Provide a summary of NHCR strategic priorities.
6. Identify strategies for engaging NHCR members in implementing strategic priorities.
7. Develop templates and process for tracking progress toward strategic plan objectives.

The awardee will receive ongoing technical assistance from the CDC Foundation and the National Association of Chronic Disease Directors. The CDC Foundation expects an open dialogue with the awardee, including regular calls (a schedule will be determined collaboratively by the CDC Foundation and awardee organization). The project period is estimated to be from March through July 2021.

PROPOSAL AND BUDGET REQUIREMENTS

Proposal Requirements: Proposals should be submitted by email to the CDC Foundation. Proposals should be no more than 10 pages, single spaced, 11-point font, not including appendices, and should address the following:

I. Applicant Experience and Capacity:

1. Organizational capacity and expertise to implement the scope of work, with a focus on addressing health disparities.
2. Team members information, including internal team and suggested project manager, consultants, and subcontractors if applicable.

II. Project Description:

1. Description of organization's proposed approach to the work;
2. Description of organization's proposed approach to pulling together and presenting findings; and
3. Restatement of the organization's understanding of the desired work scope.

III. Budget and Budget Justification:

1. Provide a budget following the guidance provided; and
2. Include an accompanying timeline and list of deliverables.

IV. Appendices:

1. Appendix A - Previous work samples; and
2. Appendix B - Team member bios.

Budget Requirements

A detailed budget should be submitted with a supporting narrative for all anticipated costs. The work will be organized and contracted by task. Each task should have a budget allocation projected and be broken down by personnel costs and item costs such as subawards/consultants, equipment, travel, other direct costs, etc. where possible. The total project budget should not exceed \$15,000.

Key Contact: Send email inquiries and proposals to Sara Reaves, Program Officer, at sreaves@cdcfoundation.org. Questions and answers will be shared with all qualifying applicant agencies.