



Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

# **ADVANCING MATERNAL HEALTH EQUITY**

#### INTRODUCTION

Blue Cross Blue Shield of Michigan and the Blue Cross Blue Shield of Michigan Foundation are offering a third cycle of the Advancing Maternal Health Equity Initiative in 2024 in alignment with our continued commitment to reduce maternal health disparities and improve maternal health outcomes across all communities in Michigan. We are accepting applications from Michigan-based nonprofit organizations for community-inspired, evidence-based and sustainable initiatives that:

- Address disparities in access, maternal and infant health care, or outcomes
- Address gaps within the social determinants of health and access to support services
- Improve maternal and infant health and well-being
- · Reduce the risk of maternal mortality and severe maternal morbidity

Grant funding may be used for interventions that take place before pregnancy, during pregnancy, during labor and delivery and postpartum. Experienced nonprofit community partners statewide that are driven by a mission to improve equity, improve service delivery to reduce poor outcomes and collaborate with perinatal stakeholders to develop and implement innovative approaches to address need in their communities are invited to apply.

### **BACKGROUND**

Health equity is achieved when individuals have equal opportunities to attain their highest level of health. In contrast, health inequity stems from unequal access to resources that impact health. Numerous structural, systemic and environmental factors influence the health of moms and babies. Health inequities can be a product of systemic racism, which has historically limited opportunities in access to high-paying employment, sufficient education and resources to achieve a better quality of life and wealth. Inequities exist and compound for individuals with other intersecting identities that are also often marginalized, forgotten or not considered. Individuals who identify within the LGBTQIA+ community, persons with disabilities, individuals from other cultural and religious backgrounds, individuals with language barriers, who also identify as Black, Indigenous or a person of color may face additional multi-layered challenges.

Often, health inequities lead to difficulty finding accessible, culturally competent and affordable health care to manage physical and mental health, and gaps in social determinants of health, including access to healthy foods, reliable transportation, and safe and affordable housing. The lack of health equity can be attributed to many adverse maternal outcomes that may also result in maternal mortality, severe maternal morbidity and maternal morbidity.

Maternal health equity in Michigan

Recommendations from the Michigan Maternal Mortality Surveillance Program Priority and Michigan Pregnancy Risk Assessment Monitoring Program (PRAMS) and conversations with Michigan's Regional Perinatal Quality Collaboratives, community organizations, health and social services providers and stakeholders shed light on opportunities to impact disparate maternal health outcomes that may provide supporting evidence or inform strategy of projects submitted under this grant opportunity. Several of Michigan's key factors impacting maternal health and well-being include timing of entry to prenatal care, the implications of life stress on maternal health, the gravity of maternal mental health during pregnancy and postpartum on maternal health outcomes, prevalence of unmet basic needs like food, housing or health care, which in turn increase stress and negatively impact wellbeing. The data also demonstrates the systemic impact of adverse childhood experiences (ACES) and the impact leading to increased risk of mental health disorders, substance abuse and chronic disease.

### **IN RESPONSE**

We know that advancing maternal health equity requires a multifaceted approach that engages community members, industry, nonprofits, economic development entities, educational institutions, governments, philanthropic partners and others. Through the Advancing Maternal Health Equity grant program, Blue Cross Blue Shield of Michigan and the Blue Cross Blue Shield of Michigan Foundation are requesting proposals from Regional Perinatal Quality Collaboratives and nonprofit organizations statewide that have the capacity, network, and experience to deliver programming within their community targeted at improving maternal outcomes for pregnant individuals.

Advancing maternal health equity will look different in each community. Michigan's Regional Perinatal Quality Collaboratives and their network of community partners are well-positioned to address their regions largest challenges. Applicants are strongly encouraged to meaningfully participate and engage with their Regional Perinatal Quality Collaborative to form partnerships with other community stakeholders that may elevate or inform planning, strategy, or services for existing or future programming. Evidence of a robust network and experience working within the maternal health landscape is required.

Regional Perinatal Quality Collaboratives and nonprofit organizations may apply for a grant to develop and implement or expand a project that advances maternal health equity by addressing disparity-related factors in maternal health.

The project should effectively and sustainably address local challenges to maternal health equity that improve poor maternal health outcomes and their upstream causes.

The funding collaborative is particularly interested in proposals that support pregnant individuals, people of color, individuals in underserved and marginalized communities, including those with intersection identities (persons with disabilities, LGBTQ+); address implicit bias; and provide culturally relevant interventions. We welcome innovative recommendations tailored to the local needs and culture within the community that include collaboration among multiple stakeholders, address maternal health equity and lead to sustainability in access, services, practice, policy, interagency agreements or funding. Selected grantees will be awarded up to \$50,000 for 12 months. Allowable expenses include program supplies, case management, care coordination, peer support, service-providing staff, organizational infrastructure, equipment or other items integral to the program's success. Capital expenses are excluded.

### **GUIDELINES**

Some examples of actions that align with this funding opportunity include, **but are not limited to**, the following:

# **Care delivery**

- Funding to support implementation and training of evidence-based care models in the clinic, hospital or birth setting — for example, models to support trauma-informed care, such as the Eat, Sleep, Console Model
- Funding to support relaunch of Maternal Infant Health Program with planned sustainability
- Implementation of Alliance for Innovation on Maternal Health (AIM) safety bundles:
  - o Obstetric care for pregnant individuals with opioid use disorder
  - Mental health depression and anxiety
  - o Improving health care response to cardiovascular disease in pregnancy and postpartum
- Expansion or implementation of telemedicine or telehealth to ensure timely access to services that may reduce maternal mortality and severe maternal morbidity

# Improved access to care and education to address poor maternal health outcomes:

- Programs that use peer support services including, Community Health Workers, family support
  professionals or home-visiting programs to improve access to care for people who may become
  pregnant, are pregnant or are in the postpartum period.
- Programs for pregnant people with substance use disorder including peer support.
- Programs that optimize the scheduling of postpartum follow-up appointments before discharge from the birthing facility.
- Programs providing breastfeeding and lactation support.
- Home visiting programs that incorporate screening, referral and follow-up for pre- and postpartum causes of maternal mortality, maternal morbidity or severe maternal morbidity
- Programs to manage high blood pressure, diabetes, kidney disease or other conditions related to severe maternal morbidity and reduce the risk of complications for people who may become pregnant, who are pregnant and those in the postpartum period.
- Programs providing training and supplies for self-blood pressure (chronic, gestational or postpartum hypertension) monitoring or gestational diabetes monitoring; innovative or evidence-based programs for monitoring chronic, gestational or postpartum hypertension or gestational diabetes.
- Programs expanding the use of Community Health Workers, nurses and midwives for hypertension management; prioritizing processes for effective management of risk for hypertensive condition with obstetric and postpartum care providers.
- Programs promoting parent and family-partner education to identify and appropriately communicate signs of postpartum complications to obstetric and postpartum care providers linked to sepsis, hemorrhage, preeclampsia and hypertension.

#### Mental health

- Programs that support the completion of depression screening once a trimester, at postpartum visits, and case management or early follow-up and referrals for people who screen positive for depression.
- Programs offering training for mental health professionals, OB providers and birth care workers to recognize and meet the unique needs of pregnant individuals and individuals who have given birth navigating postpartum depression, trauma or other mental health issues.
- Programs for pregnant individuals and parents that address their mental health needs through programs, support groups, services or referrals with follow-up.

# **Health equity**

- Programs that connect pregnant people, parents and caregivers to resources to address unmet social determinants of health needs.
- Programs piloting sustainable transportation alternatives to ensure access to treatment for substance use disorder and access to care in transportation desserts or areas with logistical setbacks.
- Programs addressing needs for pregnant individuals and individuals who have given birth with disabilities to mitigate risks during pregnancy and postpartum.
- Programs enhancing training of birthing professionals in clinical setting to manage care for pregnant individuals with disabilities.
- Programs that increase regular access to nutritious food and support for pregnant and
  postpartum people with obesity, preexisting high blood pressure, diabetes, pregnancy-induced
  high blood pressure, and gestational diabetes and their families
- Obstetric racism training and education for pre-professionals who attend schools or colleges of medicine, osteopathic medicine, nursing and social work.
- Programs that address pregnancy and its intersection with mental health, sexual abuse, interpersonal violence, trauma, substance use and chronic health conditions, as well as its increased occurrence in populations of pregnant individuals who are most vulnerable and marginalized.

# Systems approach

• Capacity needs for organizations led by Black, Indigenous, Hispanic and other people of color that serve pregnant people, parents and caregivers.

#### **ELIGIBILITY**

Applicants must be recognized by the Internal Revenue Service as a 501(c)(3) organization, or a community-based nonprofit organization paired with a 501(c)(3) organization.

# **SELECTION CRITERIA & REQUIRED DOCUMENTS**

Applications from Michigan based nonprofit organizations will be considered using the following criteria:

- Demonstrated need and a solid plan for addressing maternal health equity, improving maternal health outcomes and the potential impact the program will have in the designated community
- Incorporation of evidence-based and sustainable approaches and strategies
- Involvement of individuals with lived experience in the project
- A clearly articulated equity approach
- A well-developed project plan
- A seamless plan for sustainability in access, services, practice, policy, interagency agreements or funding
- Submission of all required documents (see below)

# **Required documents:**

- Evidence of experience in addressing maternal health outcomes as evidenced by articles, blogs or application narrative that demonstrates the objective and outcomes from past or existing programming
- An engaged and robust network of partners, as evidenced by letters of support or commitment
- An evaluation plan with measurable goals and objectives and a completed Objectives Table
- Detailed budget with line items for proposed services
- Detailed budget justification
- Submission of other documents listed in the How to Apply section

### **IMPORTANT DATES**

- Eligible applicants must complete and submit an online application by Wednesday, July 10, 2024.
- Award notification will be made by August 19, 2024.
- Program period begins October 1, 2024, and ends October 31, 2025.

# **HOW TO APPLY**

- **1.** Use this link to access the online Blue Cross grant portal: Social Mission Application Benevity Grants Management
- 2. Select the linked phrase *New Application* at the top left of the home page.

### 3. Required documents to have available for upload:

- Figures and tables, if applicable.
- Detailed budget with line items.
- Detailed budget justification for the project.
- Project timeline and work plan to accomplish objectives.
- Completed Objectives Table. This table captures the specific activities or tasks you intend to
  accomplish, the time period (days, weeks or months) in which the activities will occur, how the
  accomplishment of the activities or tasks will be evaluated (calculated or measured) and the program
  staff responsible.

- Resumes of the project directors and other key personnel and staff.
- Copy of the organization's mission, history and services.
- Copy of most recent Internal Revenue Service 501(c)(3) tax determination letter.
- Copy of the organization's most recent 990 tax return or audited financial statement.

# 5. Please note the following:

- A complete application contains responses to all online questions, addresses the Advancing Maternal Health Equity Request for Application selection criteria and all required documents are uploaded to the online grant application system.
- Late or incomplete applications may not be considered for funding.

#### HELPFUL TIPS FOR COMPLETING THE ONLINE APPLICATION

- Using Google Chrome as your Internet browser may provide the best functionality.
- The online application will save your work automatically, even if you take a break. However, it requires you to work on your application on only one computer, using only one Internet browser.
- To collaborate with someone on the application, go to the upper right of your screen to *Actions*. This will give you a link to copy and email. Once you share the link, close your tab with the application on your computer. As your collaborator works on the application and shares the link, he or she should close the application tab on his or her computer.
- To make completing the grant application easier, create a separate Microsoft Word document for copying and pasting into the grant application system that includes the following:
- a) Summary and purpose of the project (300 words maximum).
- b) Description of the organization's experience and commitment to addressing maternal health equity in the designated community. Description of the organization's engaged and robust network of partners.
- c) Description of the demonstrated need for the proposed project in the targeted community and a solid plan for addressing maternal health equity and improving maternal health outcomes in the selected community.
  - Target population and number of people that the project will reach, including age, gender, race and ethnicity and other unique characteristics.
  - ii Describe community assets, partnerships, collaborations, anticipated challenges and how they will be overcome.

- d) Description of the project plans with measurable goals and objectives. Use this link to assist you in wring SMART goals and objectives (specific, measurable, attainable, realistic and time-bound), <a href="CDC">CDC</a> Guide to Wring SMART Objectives.
- e) Description of the project, incorporating evidence-based and sustainable approaches and strategies that include how the project addresses maternal health equity, improved health outcomes and how the funding will support the project goals and objectives. Include any current program efforts and recent funding relevant to the project.
- f) Description of the project evaluation plan that measures the program's goals, objectives and expected impact on the program participants or community. How will you measure success? What information or data will you collect to monitor and report progress on the project goals and objectives?
- You can copy and paste from existing documents as needed, but you should limit your use of bullets and other formatting.
- Please review your responses before applying. After you click *submit*, you will have one last opportunity to print your answers. We recommend that you save your responses to a PDF file.
- Add grants@benevity.com to your safe senders list to ensure you receive all system communications.
- If you have questions about the application (for example, the narrative or the budget), email socialmission@bcbsm.com.
- Please send all technical questions or issues with the *application or grant website* to Benevity at grantsupport@benevity.com.