



Blue Cross and Blue Shield of Florida (BCBSF) takes great pride in helping its members lead healthy, confident lives. The company also believes strongly in giving back to its communities and has a commitment to the public good ingrained in its mission statement. This commitment to caring solutions for Floridians is just one reason why BCBSF supports The Blue Foundation for a Healthy Florida, Inc., a 501(c)(3) philanthropic foundation established in 2001.

The Blue Foundation for a Healthy Florida supports community-based solutions that address the many different health care challenges facing Florida both today and in the future. The mission of The Blue Foundation is to enhance access to quality health-related services for Floridians, with a particular focus on the uninsured and underserved. The Blue Foundation looks to partner with community leaders to recognize and support strategies that advance the health and well-being of uninsured and underserved Floridians.

To achieve its goals, The Blue Foundation strategically focuses grant allocations toward philanthropic, community-based solutions to improve program capacity and reduce barriers to access; nurtures community health leadership to reinforce local solutions, foster innovation and sustain quality; and leverages financial, human and other resources to maximize measurable impact.

Since its inception three years ago, The Blue Foundation has awarded 85 grants over seven grant cycles. These grants are rich in diversity, from educating older adults about prescription drugs, to training physicians on women's heart disease symptoms, to improving the lives of Hispanics with diabetes. With the support of BCBSF, The Blue Foundation is accomplishing its goal of providing caring solutions through grants that educate, train and improve the lives of individuals and families throughout Florida. For more information on grants previously made by The Blue Foundation, please visit [www.bluefoundationfl.org](http://www.bluefoundationfl.org).

The Blue Foundation board of directors has determined a priority focus for the foundation's grantmaking in 2005. The foundation will focus a significant portion of its resources to maximize impact in the area of community-based health clinics and outreach services. This focus will help to realistically address the vast challenges associated with providing access to and lasting outcomes connected with populations presently not receiving effective health-related prevention or treatment services. The greatest percentage of The Blue Foundation funding will be to identify, nurture and sustain such activities to benefit underserved and uninsured populations.

The Blue Foundation for a Healthy Florida awards up to \$1 million annually in grants during two proposal cycles in the summer and winter. For the Summer 2005 grant cycle, requests will generally be considered for proposals of all sizes from \$10,000 up to \$100,000. Multi-year commitments may be made, depending upon the request, the need and the funds available, but the total dollar request should not exceed \$100,000.

Eligible recipients must have tax-exempt status as a 501(c)(3) organization with the Internal Revenue Service and be located in Florida. The Blue Foundation will not award grants to: individuals; fundraising events or celebrations; political or lobbying organizations; fraternal, athletic or social organizations; reli-

gious organizations for religious purposes; or to organizations that do not directly serve Floridians. We also take great care to assure that The Blue Foundation does not directly finance health care services through insurance or other coverage mechanisms through its grants.

In an effort to assure fairness among the range of proposal applicants, The Blue Foundation will not accept more than one proposal from a single organization within a 12-month period, unless the organization has received specific approval from The Blue Foundation to do so. If an organization applied for a grant during the last cycle, it may not apply again until Winter 2005. Organizations that have applied to The Blue Foundation before the Winter 2004 cycle are eligible to apply for the Summer 2005 grant cycle.

For more information about The Blue Foundation's grant guidelines, please refer to the "Summer 2005 RFP Technical Assistance" document found on the Blue Foundation website: [www.bluefoundationfl.org](http://www.bluefoundationfl.org). We strongly encourage you to review this document before contacting our offices for information.

All proposals will receive an acknowledgement letter assigning a tracking number for your request. Materials such as videos, reports and publications should be submitted only at our request. Appointments for presentations or on-site visits will be scheduled only at our request. Grant requests become the property of The Blue Foundation for a Healthy Florida, Inc. and will not be returned to the requestor. We reserve the right to share the requests with Blue Cross and Blue Shield of Florida, Inc., or other unaffiliated grantmaking institutions. Of course, we make no representations or warranties regarding whether or not those organizations will fund your proposal.

Deliver six copies (one original plus five copies) of the application and one set of attachments by close of business on Friday, March 18, 2005 to:

**The Blue Foundation for a Healthy Florida**

Blue Cross and Blue Shield of Florida  
4800 Deerwood Campus Parkway, Building 300  
Jacksonville, FL 32246  
Attention: Michael S. Hutton, Ph.D.  
1-800-477-3736, x63215  
Fax 904-905-6638  
E-mail: [michael.hutton@bcbsfl.com](mailto:michael.hutton@bcbsfl.com)

This RFP may be downloaded by visiting [www.bluefoundationfl.org](http://www.bluefoundationfl.org). You do not need to complete the original application to be considered, but all components requested on the RFP must be included in the same order. The website also includes a technical assistance document that may be helpful to you in preparing your proposal to The Blue Foundation.

*We look forward to working with you to make a difference in the lives of our fellow Floridians.*

**CHECKLIST:**

Please use the attached checklist to verify that you have included all the relevant material in your proposal. Thank you!

# Checklist for Proposals

To assist you in being compliant with the proposal requirements set by The Blue Foundation for a Healthy Florida, Inc., feel free to use the following checklist prior to sending the proposal to The Blue Foundation.

## General Instructions

- 12 point font, double spaced
- All pages numbered (excluding cover page)
- Original plus 5 copies
- Unbound copies preferred. You may use clips or rubber bands to separate each copy.
- Both original and copied proposals mailed in same package

## Proposal Section

- Proposal includes the following:
  - Program Page Section
  - Communities Served Information Box completed
  - Program Description:
    - Goals and Measurable Objectives Section
    - Evaluation Section
    - Detailed 12-month Project Budget (line-item)
  - Budget Narrative/Explanation

## Attachments Section

- IRS letter verifying 501 (c)(3) status of fiscal agent (or verification of government entity status)
- Most recent IRS form 990 (including Schedule A)
- Audited Financial Statements (or governmental auditor's statement) of fiscal agent
- Board of Directors' List (of fiscal agent)
- Current annual operating budget
- Resumes or job descriptions of primary program staff
- Organization's annual report
- Major business and foundation donors list

# Request For Proposals — Summer 2005

Organizations seeking program funding can contact The Blue Foundation for a Healthy Florida office at 1-800-477-3736, x63215 or e-mail at bluefoundationfl@bcbsfl.com for questions about this proposal request. Applicants must provide the following information to be considered for funding.

## Program Page

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail Address \_\_\_\_\_ Web site (if applicable) \_\_\_\_\_

Employer Identification Number \_\_\_\_\_

Contact person's name, title, telephone (someone with knowledge of the initiative to be funded and responsibility for funds requested; this person will receive all correspondence related to this proposal)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested dollar amount and grant duration:

\$ \_\_\_\_\_ per year for \_\_\_\_\_ year(s) = \$ \_\_\_\_\_ total dollar amount requested  
(total must not exceed \$100,000 over grant duration)

Title and clear description of the program or project to be funded:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How the program specifically relates to the priority focus of community health clinics and outreach services for the uninsured:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **Program Description**

- Narrative (3 pages) – include vision and mission; description of target population and geographic area served; activities and services you will undertake; outcomes and desired changes you hope to make; specific measures and/or benchmarks to measure success; and plans for disseminating lessons learned to benefit others interested in your initiative. Also include timeframes for implementation and your plan for sustainability of the program beyond the proposal period.
- Goals and Objectives (1 page) – Specific goals and measurable objectives for this project in outline or tabular form.

## Program Description (con't)

- Evaluation (1 page) – expand on the indicators that you will use as evidence that outcomes have been achieved; how you will measure success both short- and long-term; how often you will evaluate the program and report progress; and how you will correct problems if necessary.
- Project Budget – detail project expenses and anticipated income sources; discuss financial resources you will use to sustain the program after the proposal period. Clearly define the items for which The Blue Foundation will be financially responsible, and the other funding sources (actual, pending and those for which you have applied) for this program.

## Attachments

Please include one copy of:

- Current IRS ruling letter(s) recognizing tax exempt status under 501(c) (3) and private foundation status under 509 (a) (1), (2) or (3)
- Most recent IRS form 990 (including Schedule A)
- Most recent financial statement (audited, if available)
- Current board of directors (including their professional affiliations), officers and key employees
- Current annual operating budget
- Resumes of current program staff responsible for this initiative, or a position description if staff is not hired
- Organization's annual report (if applicable)
- List of other major business and foundation donors

## Communities Served Information

For internal evaluation purposes only, please classify your request by noting percentages in the appropriate lines below regarding the demographics of your proposal's target population (check all that apply). This information is for reporting purposes only and will not be considered when evaluating the effectiveness or value of your proposal. In each category, the percentage amount should equal 100 percent.

**Geography:** \_\_\_\_\_ Rural \_\_\_\_\_ Urban \_\_\_\_\_ Mixed (rural and urban)

**Telephone Area Code** \_\_\_\_\_

**Geographic Area of State:** \_\_\_\_\_ Northwest \_\_\_\_\_ North Central \_\_\_\_\_ Northeast  
\_\_\_\_\_ Central West \_\_\_\_\_ Central \_\_\_\_\_ Central East \_\_\_\_\_ Southwest \_\_\_\_\_ Southeast \_\_\_\_\_ Statewide

**Age Group:** \_\_\_\_\_ All Ages \_\_\_\_\_ Children (0-5) \_\_\_\_\_ Youth (6-12) \_\_\_\_\_ Teenagers (13-18)  
\_\_\_\_\_ Adult Males (19-55) \_\_\_\_\_ Adult Females (19-55) \_\_\_\_\_ Seniors (56+) \_\_\_\_\_ Other \_\_\_\_\_

**Ethnic Background:** \_\_\_\_\_ All \_\_\_\_\_ African American \_\_\_\_\_ Haitian \_\_\_\_\_ Hispanic  
\_\_\_\_\_ White \_\_\_\_\_ Other \_\_\_\_\_

**Program Focus:** \_\_\_\_\_ Alzheimer's/Dementia \_\_\_\_\_ Asthma \_\_\_\_\_ Cancer \_\_\_\_\_ Cultural and Health Disparities  
\_\_\_\_\_ Diabetes \_\_\_\_\_ Health Education \_\_\_\_\_ Heart Disease/Stroke \_\_\_\_\_ HIV/AIDS \_\_\_\_\_ Mental Illness \_\_\_\_\_ Obesity  
\_\_\_\_\_ Prescription Drugs \_\_\_\_\_ Prevention \_\_\_\_\_ Substance Abuse \_\_\_\_\_ Other \_\_\_\_\_

**Service Model:** \_\_\_\_\_ Early Intervention \_\_\_\_\_ Health Education/Prevention \_\_\_\_\_ Long Term Care  
\_\_\_\_\_ Outreach \_\_\_\_\_ Primary Care \_\_\_\_\_ Other \_\_\_\_\_

**Population Served:** \_\_\_\_\_ Disabled/Physically Challenged \_\_\_\_\_ Elderly \_\_\_\_\_ Health Care Professionals  
\_\_\_\_\_ HIV Positive \_\_\_\_\_ Homeless \_\_\_\_\_ Immigrants/Newcomers/Refugees \_\_\_\_\_ Mentally/Emotionally Impaired  
\_\_\_\_\_ Migrant Workers \_\_\_\_\_ Parent/Elderly Caregiver \_\_\_\_\_ Pregnant Mothers \_\_\_\_\_ Students \_\_\_\_\_ Uninsured  
\_\_\_\_\_ Veteran \_\_\_\_\_ Working Poor \_\_\_\_\_ Other \_\_\_\_\_



Blue Cross and Blue Shield of Florida  
4800 Deerwood Campus Parkway  
Building 300, 4th Floor  
Jacksonville, FL 32246-8273