

**Presentation to the  
Joint Legislative Oversight Committee on Health and Human Services  
on Minority Health Grant Program within the Division of Public Health**

**April 10, 2012**

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Department of Health and Human Services**

In 2005, the General Assembly appropriated funds for the establishment of the Community Focused Eliminating Health Disparities Initiative (CFEHDI). The goal of the Initiative was to close the gap in health status of African American, Hispanics/Latinos, and American Indians as compared to the health status of their counterpart. The funding provided grants-in-aid to local public health departments, American Indian tribes, and faith-based and community-based organizations to close the gap in the health status. The areas of focus on health status were infant mortality, HIV-AIDS and sexually transmitted infections, cancer, diabetes, and homicides and motor vehicle deaths. Session Law 2011-145, Section 10.21 mandated changes to the CFEDHI program, limiting the program to a maximum of 12 grants-in-aid (4 each in 3 regions of the state) to eligible applicants --- community-based organizations, faith-based organizations, local health departments, hospitals, and CCNC networks. The grantees were to focus their efforts on heart disease, stroke, diabetes, obesity, asthma, HIV/AIDS, and cancer. Applicants are required to demonstrate substantial participation and involvement with all other categories of eligible applicants, in order to ensure an evidence-based medical home model that will affect change in health and geographic disparities. The legislation limited grants to \$300,000 annually with no more than 8% in overhead costs, and required DHHS to use an independent panel to conduct the review of applicants.

In State Fiscal Year 2011-12 and in response to the requirements set forth in Session Law 2011-145, Section 10.21, DHHS terminated the 32 existing CFEHDI grants in October and December 2011. Request for Applications (RFA) # A-240 was released in September 2011 promoting the regional collaborative approach set forth in session law. This RFA resulted in 12 proposed awardees selected with contracts to be executed in February 2012 (Year 1 - February 1, 2012 to May 31, 2012; Year 2 - June 1, 2012 to May 31, 2013).

The information below will address changes to the status of the Initiative as well as changes to the Office of Minority Health and Health Disparities:

**Status of the grants and the grant award process**

- On March 23, 2012, proposed grantees under Request for Applications (RFA) # A-240 were informed the Division of Public Health was terminating the grant process and no grants would be awarded. This decision was made to ensure the integrity of the grant program.

- On April 3, 2012, a new timeline for release of a new RFA for CFEHDI grants was broadly communicated to potential applicants as defined in Session Law 2011-145, Section 10.21.
- The proposed timeline for release of a new RFA and awarding of new contracts is:
  - April 9, 2012: Request for Applications released to eligible applicants*
  - April 13, 2012: Bidder's Webinar*
  - April 17, 2012: End of Q&A period. All questions due in writing by 5pm*
  - April 19, 2012: Answers to Questions released to all applicants, as an addendum to the RFA*
  - May 4, 2012: Applications due by 5pm*
  - May 18, 2012: Successful applicants will be notified*
  - July 15, 2012: Contract begins*

#### **Recent changes in the Office of Minority Health and Health Disparities (OMHHD)**

- In February 2012, DHHS initiated an investigation regarding the use of state funds in CFEHD grants administered by the OMHHD.
- The investigation determined there were certain irregularities in management, oversight, monitoring and use of these state resources.
- In accordance with state law, this suspected misuse of state funds was reported to the State Bureau of Investigation.
- As a result of preliminary results of this investigation, the director and a program consultant in the OMHHD resigned; a third staff member was re-assigned out of the OMHHD. The investigation is ongoing.

#### **Plans for leadership**

- An interim director of the OMHHD has been appointed until a permanent director is hired.
- The Division of Public Health will advertise and recruit for a qualified permanent director of OMHHD.
- Training in grants management and sub recipient monitoring will be required of appropriate staff in OMHHD.