



Foundation for
Healthy Communities

Foundation for Healthy Communities Request for Proposals (RFP) – Data Collection and Reporting Consulting Services

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The Governor's Office of New Opportunities and Rural Transformational Health (GO- NORTH), was established by Executive Order under Governor Kelly Ayotte, and is funded by the Rural Health Transformation (RHT) Federal program. GO-NORTH advances five strategic initiatives to improve the health and sustainability of rural New Hampshire.

Initiative 1: Population Health

Increase prevention, chronic disease management, and improved behavioral and maternal health.

Initiative 2: Access

Ensure sustainable access to care by strengthening rural hospitals, health centers, EMS, and telehealth services

Initiative 3: Workforce

Build and retain a skilled rural health workforce through education, training, and career pathways.

Initiative 4: Technology

Modernize care delivery by expanding technology, interoperability, and data security.

Initiative 5: Financial Sustainability

Promote financial sustainability with innovative payment models and value-based care.

[Program Overview | GO-NORTH](#)

GO NORTH delivers this work through five Hubs, each supported by a GO NORTH lead who provides coordination, guidance, and oversight to ensure alignment with statewide priorities. The 5 Hubs represent rural health experience and knowledge that will support our work together.



At-a-Glance

Funding Overview	FHC is seeking a qualified consulting firm or team to serve as its data and reporting partner, supporting data collection system design, reporting framework development, subrecipient data capacity building, technology implementation, and ongoing program-level analytics.
Grant Start Date	Execution of contract through September 30, 2027, multiple-year awards contingent on funding from GO-NORTH
Eligible Applicants	All New Hampshire-based nonprofit, for-profit, or community-based organizations; nonprofits must be in good standing with the NH secretary of state
Application Deadline	Application Close Date: August 31 st , 2026 Notification of Award: September/October 2026
Submission	GO-NORTH-FHC@healthynh.org
Website	healthynh.org

Background and Program Context

As a core hub, FHC is responsible for deploying grant funds to a broad portfolio of rural health subrecipients - including primary care providers, critical access hospitals, emergency medical services, behavioral health organizations, oral health providers, and community-based organizations. FHC will manage upwards of 50-100 active subrecipient awards at any given time, spanning multiple clinical and digital infrastructure investment areas.

The scale and complexity of this program creates a significant data management and reporting challenge. FHC must collect, validate, synthesize, and report performance data from subrecipients at regular intervals; maintain a real-time reporting infrastructure for GO-NORTH; ensure subrecipients have the tools and technical assistance to meet data obligations; and build a program-wide evaluation and learning system aligned with the GO-NORTH five-year goals.

FHC is seeking a qualified consulting firm or team to serve as its data and reporting partner, supporting data collection system design, reporting framework development, subrecipient data capacity building, technology implementation, and ongoing program-level analytics.

FHC Technology Environment

The selected consultant will be expected to work within and alongside FHC's existing technology ecosystem. Proposals must demonstrate familiarity with or demonstrated ability to integrate with the following platforms:

- **Blackbaud Grantmaking (BBG) - Grant Management System of Record**
Blackbaud Grantmaking serves as FHC's official grant lifecycle management platform. All subrecipient award records, compliance requirements, payment schedules, reporting milestones, and official grant documentation are maintained in BBG. The consultant will be expected to understand BBG's data structure, work with FHC staff to define reporting fields and requirements within BBG and support the design of data collection workflows that align with BBG's reporting module. BBG's Grantee Portal will serve as the primary channel through which subrecipients submit financial and programmatic reports.
- **Blackbaud Financial Edge NXT (BBNXT) - Financial System of Record**
Blackbaud Financial Edge NXT is FHC's financial accounting system. All payment processing, budget-to-actual tracking, reimbursement documentation, and audit support functions are managed in BBNXT. The consultant should understand the relationship between programmatic data (BBG) and financial data (BBNXT) and ensure that the reporting framework accounts for the financial dimensions of subrecipient performance - including expenditure pacing, allowable cost verification, and budget variance analysis.
- **Monday.com - Operational Project Management and Workflow Coordination**
Monday.com serves as FHC's operational coordination platform for GO-NORTH. FHC uses Monday.com to manage subrecipient onboarding workflows, track compliance milestones, coordinate internal task management across program directors, and maintain operational dashboards. The consultant will work alongside FHC to align data collection and reporting workflows in Monday.com with the broader reporting framework and may be asked to support Monday.com board design or workflow configuration as part of scope.
- **Microsoft 365 Ecosystem - Collaboration and Document Management**
FHC operates within the Microsoft 365 environment, using SharePoint as its document management system, Teams for internal and external communications, Power BI for executive-level analytics and dashboards, and Power Automate for workflow integration. The consultant should be proficient in the Microsoft 365 ecosystem and capable of designing reporting outputs compatible with Power BI.
- **HRiA Award Manager - Interim Applicant-Facing Grant Portal**
FHC is currently using HRiA Award Manager as an interim grant application and award management portal while the full Blackbaud Grantmaking Grantee Portal is being configured. The consultant should be aware of this transition and prepared to support data continuity as FHC migrates from HRiA to BBG over the course of Year 1.

The selected consultant will be expected to recommend and, where appropriate, implement additional technology tools to support data collection, visualization, and reporting. Proposed technology tools should be compatible with or complementary to FHC's existing ecosystem and should be justified based on specific functional needs within the scope of work.

Scope of Work

The consultant will be expected to provide services across five primary work areas. Proposals should clearly describe the approach, staffing, timeline, and estimated cost for each area.

Work Area 1: Reporting Framework Design & Data Architecture

Design and implement a comprehensive program-wide reporting framework that supports FHC's obligations to GO-NORTH, GO-NORTH Evaluator, CMS, and its subrecipients.

Key deliverables and tasks include:

- Assess existing data collection requirements across all FHC investment areas (Emergency Medical Services, Primary Care, CAH, Behavioral Health, Oral Health, Workforce, Digital Infrastructure, etc.)
- Design a standardized subrecipient data collection framework - including common indicators, program-specific metrics, GO-NORTH and CMS-required reporting elements
- Develop a data dictionary defining all metrics, data sources, collection frequency, and responsible parties
- Map data flow from subrecipient submission
- Align framework with GO-NORTH evaluation requirements and the GO-NORTH Evaluation Contractor methodology
- Ensure framework supports both quantitative outcomes reporting and qualitative narrative reporting
- Design data quality assurance and validation protocols

Work Area 2: Subrecipient Data Capacity Building & Technical Assistance

Build the data collection and reporting capacity of subrecipients so they can meet FHC's reporting requirements accurately and consistently.

Key deliverables and tasks include:

- Conduct baseline data capacity assessments across subrecipient cohorts by investment area
- Develop and deliver training curricula on data collection, metric definition, and reporting expectations
- Provide direct technical assistance to subrecipients with limited data infrastructure
- Create user-friendly data collection templates and tools for subrecipients without electronic health record based reporting capacity
- Design tiered TA support models for small, medium, and large subrecipients
- Facilitate peer learning among subrecipient cohorts around data practices and quality improvement
- Support subrecipients in connecting clinical data systems (EHRs, billing systems) to FHC reporting requirements

Work Area 3: Program-Level Analytics & GO-NORTH / CMS Reporting

Produce regular program-level analytics, performance summaries, and required reports for GO-NORTH

Key deliverables and tasks include:

- Aggregate and synthesize subrecipient data into program-level performance summaries
- Produce quarterly performance reports aligned with GO-NORTH reporting requirements
- Support preparation of Quarterly and Annual Reports to CMS (first due August 7, 2026)

- Develop executive dashboards for FHC leadership and GO-NORTH stakeholders
- Design and produce investment-area-specific performance briefs (e.g., EMS cohort, Primary Care cohort)
- Conduct trend analysis and flag performance concerns for FHC program directors
- Support FHC and subrecipients mid-course corrections and quality improvement cycles based on data findings
- Develop a learning and dissemination agenda for sharing RHTP lessons statewide

Work Area 4: Ongoing Data Governance & Program Evaluation Support

Establish and maintain data governance structures and support FHC's engagement with GO-NORTH evaluation contractor, The National Opinion Research Center (NORC) throughout the program.

Key deliverables and tasks include:

- Develop a data governance policy for FHC covering data ownership, access, security, and sharing
- Establish protocols for data sharing between FHC, subrecipients, GO-NORTH and GNEC
- Coordinate with GNEC to align FHC's internal data collection with the program's external evaluation design
- Support FHC in responding to data requests from GO-NORTH, CMS, and federal auditors, including any quality improvement data needed.
- Maintain a program data repository that supports longitudinal analysis across the five-year grant period
- Conduct annual data infrastructure reviews and recommend updates as the program evolves

Suggested Technology Platforms

Proposals should identify and cost out the technology tools the consultant recommends for this engagement. FHC is open to consultant-proposed platforms, subject to compatibility with FHC's existing ecosystem and 2 CFR Part 200 allowable cost requirements. The following platforms are provided as reference examples - proposers are not required to use these specific tools and are encouraged to recommend alternatives based on their experience:

Platform	Description & Estimated Cost
Tableau	Data visualization and dashboard platform. Well-suited for program-level analytics, geographic mapping of subrecipient data, and executive reporting. Can connect directly to Power BI, SharePoint, and SQL-based data sources. Estimated cost: \$[x]/user/year for Creator licenses; \$[x]/year for Viewer access. FHC would retain licenses post-engagement.
Microsoft Power BI	Already within FHC's Microsoft 365 environment. Preferred platform for executive dashboards and GO-NORTH reporting outputs. Consultant should be proficient in Power BI report design and DAX. Additional licensing cost anticipated for FHC-internal use.
Smartsheet / Airtable / similar	Structured data collection and workflow management for subrecipient reporting submissions where Monday.com's native capabilities are insufficient. Estimated cost: \$[x]/user/year.
Stata / R / Python (statistical analysis)	For more advanced program-level analysis, longitudinal outcome modeling, and trend analysis. No licensing cost for open-source tools (R, Python). Stata license: \$[x]/year.
ArcGIS / Power BI Maps	Geographic visualization of service areas, access gaps, and subrecipient distribution across NH counties. ArcGIS estimated cost: \$[x]/year.
Dedoose / NVivo (qualitative analysis)	Qualitative data analysis for narrative reports, focus groups, case studies, and success story documentation. Estimated cost: \$[x]/license.

Proposals must include an itemized technology budget identifying all recommended tools, license costs, implementation costs, and projected Year 1 and multi-year costs. FHC will retain ownership of all data, dashboards, and reporting infrastructure developed under this contract.

Key Deliverables

Deliverable	Description & Timeline
D1 - Program Reporting Framework	Comprehensive data dictionary, metric definitions, subrecipient reporting templates, and data flow map. Due: within 60 days of contract execution.
D2 - Subrecipient Data Capacity Assessment	Baseline assessment of data capacity across subrecipient cohorts with tiered TA recommendations. Due: within 90 days of contract execution.
D3 - Technology Implementation Plan	Recommended technology stack with implementation roadmap, cost estimates, and compatibility analysis. Due: within 30 days of contract execution.
D4 - Power BI / Dashboard Build	Configured executive and program-level dashboards for FHC and GO-NORTH. Due: within 150 days of contract execution.
D5 - Subrecipient TA Curriculum	Training materials, data collection guides, and TA resources for subrecipients. Due: within 120 days of contract execution.
D6 - Quarterly Performance Reports	Program-level performance summaries aggregated from subrecipient data. Ongoing - due within 30 days of each quarter-end.
D7 - Annual Report Support Package	Compiled data exhibits, performance summaries, and narrative support for FHC's Annual Report to GO-NORTH. Due: annually by July 15.
D8 - Data Governance Policy	FHC data governance framework covering ownership, access, sharing, and security. Due: within 180 days of contract execution.
D9 - Year-End Program Analytics Report	Comprehensive annual analysis of program performance, trends, and recommendations. Due: annually by August 31.
D10 - Technology Sustainability Plan	Documentation and transition plan ensuring FHC can maintain all systems and dashboards post-engagement. Due: annually updated.

Required Qualifications

Proposals will be evaluated on the qualifications of the proposing firm or team. Scoring criteria can be found on page 12 of this document. The following qualifications are required:

- Demonstrated experience designing and managing data collection and reporting systems for large, multi-site federal grant programs (CMS, HRSA, HHS, or comparable)
- Experience working with subrecipient or grantee populations with diverse data infrastructure and capacity levels
- Proficiency in Power BI, including report design, data modeling, and DAX; experience with Tableau preferred
- Familiarity with Blackbaud Grantmaking or comparable grants management systems strongly preferred
- Experience with health care data, including clinical outcome metrics, population health indicators, and value-based payment performance measures
- Knowledge of federal grant reporting requirements under 2 CFR Part 200, including subrecipient monitoring and financial reporting
- Experience providing data-related technical assistance to non-profit health organizations
- Familiarity with New Hampshire's rural health landscape preferred but not required

Preferred Qualifications

- Experience supporting state-level rural health transformation or value-based payment initiatives
- Experience implementing or integrating with Monday.com, SharePoint, or Microsoft Power Automate
- Experience with REDCap or comparable structured data collection platforms
- Experience using ArcGIS or equivalent for geographic health data visualization

Proposal Requirements

Proposals must include the following sections, in order. Page limits are noted where applicable.

- **Section 1 - Cover Letter (1 page)**
Identify the firm, primary contact, and a brief statement of interest. Confirm the proposer's ability to meet the contract timeline and the principal staff who will lead the engagement.
- **Section 2 - Organizational Qualifications (3 pages max)**
Describe the firm's relevant experience, including prior engagements with federal grant programs, health care data systems, and subrecipient TA. Provide at least three relevant client references with contact information.
- **Section 3 - Proposed Approach (5 pages max)**
Describe the firm's approach to each of the five Work Areas. Include methodology, tools, and how the approach accounts for the diversity of FHC's subrecipient portfolio. Describe how the consultant will integrate with FHC's existing technology ecosystem (BBG, BBNXT, Monday.com, Power BI).
- **Section 4 - Staffing Plan (2 pages max)**
Identify all key personnel, their roles, qualifications, and estimated time commitment (% FTE) for each phase of the engagement. Identify any proposed subcontractors and their roles.
- **Section 5 - Technology Recommendations (2 pages max)**
Identify the specific technology tools the consultant proposes to use or implement. Provide a brief justification for each tool, estimated costs, and a description of how each tool integrates with FHC's existing ecosystem.
- **Section 6 - Proposed Timeline (1 page)**
Provide a high-level implementation timeline from contract execution through September 30, 2027, identifying key milestones and deliverable dates for each Work Area.
- **Section 7 - Budget and Cost Proposal (no page limit)**
Provide an itemized budget including: (a) personnel costs by role and hours, (b) travel and direct costs, (c) technology licensing and implementation costs (itemized by platform), (d) subcontractor costs if applicable, and (e) total Year 1 and multi-year projected costs. Proposals must clearly distinguish between consultant fees and technology costs. FHC reserves the right to negotiate scope and budget prior to award
- **Section 8 - Work Samples (optional)**
Up to two work samples demonstrating relevant prior work - e.g., a reporting framework, dashboard, data collection tool, or TA curriculum developed for a comparable engagement.

Budget Guidance & Award Parameters

To assist proposers in scoping this engagement appropriately, FHC provides the following guidance on anticipated investment levels. These figures are estimates intended to promote competitive, right-sized proposals - they are not commitments.

Year 1 Budget Ceiling: FHC anticipates awarding a contract with a total Year 1 value of up to \$500,000, inclusive of all consultant fees, subcontractor costs, technology licensing and implementation, and direct costs. Proposals that significantly exceed this range without clear justification may be considered non-competitive.

Anticipated Budget Range by Component — Year 1

Cost Category	Estimated Range (Year 1)	Notes
Consultant Personnel (all roles, all work areas)	\$320,000 – \$380,000	Should reflect blended rates across senior leads, data analysts, and TA staff. Itemize by role and estimated hours.

Subcontractor Costs (if applicable)	Up to \$60,000	Subcontracting requires prior FHC written approval. Identify subcontractors and roles in the staffing plan.
Technology Licensing & Implementation	\$60,000 – \$100,000	Itemize each tool, annual license cost, and one-time implementation fees separately.
Travel & Direct Costs	Up to \$20,000	In-state travel for subrecipient TA and FHC site visits. Out-of-state only with prior FHC approval.
Total Year 1	Up to \$500,000	Inclusive of all categories above. Proposals may come in under this ceiling- FHC values cost-effectiveness.

Personnel Costs

Personnel costs must be itemized by role, with the following information provided for each position:

- Role / title and a brief description of responsibilities
- Estimated hours per phase (onboarding/design, implementation, steady-state, closeout)
- Proposed hourly or daily rate
- Total estimated cost by role

FHC expects proposals to reflect a clearly differentiated staffing model. At minimum, proposals should identify personnel covering the following functional responsibilities:

Role	Primary Responsibilities
Engagement Lead / Project Director	Senior-level oversight, FHC relationship management, GO-NORTH reporting coordination, quality assurance
Data Architect / Reporting Framework Lead	Design and implementation of the data architecture, subrecipient data dictionary, and BBG reporting field structure
Technology Implementation Lead	Power BI dashboard development, data pipeline configuration, technology tool deployment
Subrecipient TA Coordinator(s)	Direct TA delivery to subrecipients, training curricula development, tiered support model management
Data Analyst(s)	Ongoing data aggregation, validation, quarterly report production, trend analysis
Data Governance Specialist	Policy development, GNEC coordination, data sharing protocols, audit readiness

Rate Reasonableness: FHC will evaluate proposed hourly rates against market benchmarks for health data consulting in the Northeast. Rates above \$250/hour for senior roles or \$175/hour for analyst-level roles should be clearly justified. Blended team rates and fixed-fee structures are acceptable if clearly explained.

Technology Licensing & Implementation Costs

Proposers must itemize all recommended technology tools in the budget, separated from personnel costs. For each proposed tool or platform, the budget must include:

- Tool name and vendor
- Purpose and functional role within the scope of work
- Annual licensing cost (Year 1 and projected Years 2–5)
- One-time implementation or configuration cost (if applicable)
- Integration requirements with FHC's existing ecosystem (BBG, Power BI, Monday.com)
- Who owns and maintains the tool after the consulting engagement ends

Reference Cost Ranges for Common Tools

The following are provided as reference benchmarks only. Proposers are not required to use these tools, but proposals recommending tools in these categories should reflect similar cost structures:

Tool / Category	Primary Use	Estimated Cost Range	Notes
Power BI Pro (Microsoft 365)	Dashboards & executive reporting	\$10/user/month — typically \$3,000–\$6,000/yr for FHC team	FHC already has M365; incremental licensing only
Tableau or Power BI Premium	Advanced visualization / GNEC-facing reporting	\$15,000–\$40,000/yr	Justify over Power BI Pro if proposed
Smartsheet or Airtable	Subrecipient data tracking workflows	\$3,000–\$10,000/yr	Only if Monday.com is insufficient for data layer
Data integration / ETL tool (e.g., Fivetran, Stitch, Zapier)	Automated data pipelines between systems	\$5,000–\$20,000/yr	Should justify vs. Power Automate (already in M365)
Custom BBG configuration / API development	BBG reporting module build-out	\$15,000–\$40,000 one-time	Coordinate with FHC's BBG implementation team

2 CFR Part 200 Note: All technology costs must be allowable, allocable, and reasonable under 2 CFR Part 200. Any technology tool with a useful life greater than one year and a unit cost at or above FHC's capitalization threshold will be subject to equipment provisions under 2 CFR §200.313, including disposition requirements at contract end. Proposers should account for this in their sustainability planning.

Multi-Year Cost Projections (Budget Periods 2–5)

FHC expects the selected consultant to provide ongoing support throughout the full contract period (through September 30, 2031). Proposals must include projected costs for each budget period, structured as follows:

Budget Period	Dates	Expected Scope Focus	Projected Cost Range
Budget Period 1 (BP1)	Oct 2025 – Sep 2027	Full build-out year: framework design, technology implementation, subrecipient onboarding, reporting infrastructure. Highest investment year.	Up to \$500,000
Budget Period 2 (BP2)	Oct 2027 – Sep 2028	Steady-state operations: ongoing TA, quarterly/annual reporting, dashboard maintenance, data quality management, GNEC coordination.	\$300,000 – \$400,000
Budget Period 3 (BP3)	Oct 2028 – Sep 2029	Optimization and refinement: system improvements, expanded cohort reporting as new RFA awards come online, mid-program evaluation support.	\$250,000 – \$350,000
Budget Period 4 (BP4)	Oct 2029 – Sep 2030	Sustainability transition: begin knowledge transfer to FHC staff; reduce consultant dependency; maintain reporting and NORC support.	\$200,000 – \$300,000
Budget Period 5 (BP5)	Oct 2030 – Sep 2031	Close-out support: final reporting, data archiving, documentation handoff, sustainability plan execution.	\$150,000 – \$250,000

Multi-year projections do not constitute a commitment by FHC or GO-NORTH to fund continuation years. Continuation beyond BP1 is subject to satisfactory contractor performance, available funding, and GO-NORTH authorization. FHC anticipates issuing annual contract amendments or renewals for each subsequent budget period rather than a single multi-year award.

Required Budget Format

The budget submission must be organized as follows. Proposers may use their own format provided all required elements are present. FHC prefers submission as a separate Excel workbook with one tab per budget period.

- (a) Personnel costs** Itemized by role — name (if known), title, hourly/daily rate, estimated hours by phase, and total cost
- (b) Subcontractor costs** Itemized by firm name, role, and total cost. Subcontracting requires prior FHC written approval.
- (c) Technology costs** Itemized by tool — vendor, purpose, annual license cost, one-time implementation cost, and total Year 1 cost
- (d) Travel & direct costs** Estimated mileage, lodging, per diem for in-state TA visits; any other direct costs
- (e) Indirect / overhead** Rate applied, base to which it applies, and total indirect cost. Must not exceed 10% of total contract.
- (f) Year 1 total** Sum of all categories above
- (g) Multi-year projections** Projected total cost for BP2–BP5 by budget period (summary level is acceptable)

Proposals must clearly distinguish between consultant fees and technology costs. Bundled or opaque cost proposals will receive lower scores on the budget evaluation criterion.

Scoring

Proposals will be evaluated by a review committee composed of FHC staff and, as applicable, GO-NORTH representatives. Awards will be made to the proposer(s) that best demonstrate the capacity to meet FHC's program needs at reasonable cost.

Criterion	Points	Description
Organizational Experience & Qualifications	25 points	Demonstrated experience with comparable federal grant programs, health care data systems, and subrecipient populations. Work samples taken into consideration
Proposed Approach & Methodology	25 points	Quality, specificity, and practicality of the proposed approach across all five Work Areas; demonstrated understanding of FHC's program context and technology environment.
Staffing Plan	10 points	Qualifications and availability of key personnel; clear roles and appropriate time allocation.
Technology Recommendations	10 points	Appropriateness, cost-effectiveness, and compatibility of proposed technology tools with FHC's existing ecosystem.
Budget Reasonableness	30 points	Cost reasonableness relative to scope; clarity of cost breakdown; value for investment.

Contract Terms & Conditions

- FHC reserves the right to award to one or more vendors, to reject any or all proposals, to waive informalities, and to negotiate scope and cost prior to award.
- The selected consultant will be required to execute FHC's standard professional services agreement, which includes provisions for data confidentiality, intellectual property ownership (FHC retains all deliverables), conflict of interest disclosure, and compliance with 2 CFR Part 200.
- All data collected, systems built, and reports produced under this contract are the property of FHC. The consultant may not use, publish, or share program data without written consent from FHC.
- The consultant must comply with applicable NH and federal privacy requirements for any engagement involving protected health information.
- Subcontracting requires prior written approval from FHC. Any subcontractor must meet the same qualification standards as the prime contractor.
- This contract is funded through a federal CMS grant. All costs are subject to 2 CFR Part 200 allowability, reasonableness, and allocability standards. FHC reserves the right to disallow costs that do not meet federal requirements.

The consultant must maintain records sufficient to support all invoiced costs and make them available for review by FHC, GO-NORTH, CMS, or federal auditors upon request.

Submission Instructions

Proposals must be submitted via email to GO-NORTH-FHC@healthynh.org by August 31st at 5:00 PM ET. Late submissions will not be accepted.

- Proposals should be submitted as a single PDF document.
- Budget and cost proposal may be submitted as a separate Excel or PDF file.