



**MICHIGAN HEALTH**

**ENDOWMENT FUND**

**2025 BEHAVIORAL HEALTH INITIATIVE**

**Request for Proposals  
Overview**

March 13, 2025



# WEBINAR AGENDA

- Welcome & Introductions
- Brief overview of concept paper process and timeline
- Priority areas, review criteria, and indirect expenses
- *Remember: Ask questions in the Zoom Q&A Box*

# HEALTH FUND SQUAD

## TEAM BEHAVIORAL HEALTH



**BECKY CIENKI**  
Director



**DREW MURRAY**  
Sr. Program Officer



**SARAH WASIL**  
Program Officer



**GRACE BROOKS**  
Program Manager

## OTHER SQUADDIES



**NEEL HAJRA**  
CEO



**SAYRE CORBIN**  
Grants Manager



**VERONICA MARCHESE** — Program Officer  
Community Health & Capacity Building

# WELCOME!

- This webinar is being recorded. The recording will be available on our website later this week.
- Your line is muted – this helps reduce background noise.
- If you have questions, concerns, or issues with *webinar logistics* please use the **Chat Box** in Zoom – it is being monitored.
- If you have questions about the *RFP*, we will address them at the end of the webinar. However, submit questions at any point via the **Q&A Box** in Zoom. Feedback on individual concepts will be provided in responses to concept papers.



# TIMELINE AND OVERVIEW

**The aim of the Behavioral Health Initiative is to improve access to effective mental health and substance use disorder (SUD) services for Michigan residents.**

<b>Grant amount:</b>	Up to \$500,000
<b>Time period:</b>	Up to two-year grants
<b>Concept papers due:</b>	April 2 <sup>nd</sup> , 2025, 5:00 p.m. ET
<b>Full application due:</b>	May 7 <sup>th</sup> , 2025, 5:00 p.m. ET
<b>Awards announced:</b>	September 2025

**Remember: The Health Fund Board of Directors has sole responsibility for all grant decisions.**

# CONCEPT PAPERS

Strongly Encouraged

**No more than two single-spaced pages!** Concept papers are reviewed as they are received.

Please address the following:

- Brief overview of the initiative, including proposed impact
- Key collaborative partners
- Draft budget



# APPLICATIONS

1. Apply using Health Fund grant portal by 5:00 p.m. (ET) on May 7<sup>th</sup>.
2. Applications are reviewed by program staff and subject matter experts. We may follow up with clarifying questions.
3. Awards are announced in September 2025.

# PRIORITY AREAS

The Behavioral Health Initiative has identified priority areas for this year to complement [the Health Fund's Strategic Plan](#). We are most interested in funding projects that address these priority areas.



**IMPLEMENTATION OF INNOVATIVE  
CARE DELIVERY MODELS**



**MULTISECTOR RESPONSES**



**USE OF INNOVATIVE TECHNOLOGY**



**IMPLEMENTATION OF TEAM-  
BASED APPROACHES TO CARE**



# INNOVATIVE CARE DELIVERY MODELS

- Novel approaches and evidence-informed interventions
- Create solutions to persistent access barriers, health disparities
- Establish processes, systems, infrastructure for more effective and applicable care delivery



# MULTISECTOR RESPONSES

- Aimed at developing and strengthening local systems of care for mental health and SUD and supporting efficient entry to treatment
- Projects engage new partnerships, deliver care in non-traditional settings, respond to access barriers
- Past grants have included schools, courts, law enforcement, health care, libraries, and others



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# INNOVATIVE TECHNOLOGY

- Use of tech platforms to improve access to and/or quality of care
- Deploy technology to scale services, expand reach, promote collaboration, or otherwise increase access to care
- Past projects focused on CIE, screening tools, care integration platforms, telehealth, and more



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# TEAM-BASED APPROACHES TO CARE

- Including integration at the point of care, sharing health information among providers, and increased provider consultation
- Equipping providers to practice at top of their training
- One example: use of peer recovery coaches in team-based settings was featured in a recent Health Fund blog



[READ OUR BLOG POST](#)



# Q&A PART 1

- To ask a question, select the Q&A icon on your screen and type your question.
- Please don't pitch specific ideas—submit a concept paper!
- We will have additional Q&A time at the end of the webinar.

# REVIEW CRITERIA: WHAT WE LOOK FOR

**COLLABORATION**. The project demonstrates collaboration, including community/participant involvement in planning and implementation, multi-sector partnerships with defined roles and responsibilities related to the project, and leverage of external resources.

**EMPOWERING COMMUNITIES**. The project empowers communities to support their ongoing health needs or challenges, and it engages community leaders to share in decision-making.

**HEALTH EQUITY**. The project benefits the populations most affected by the health issue, removes barriers to health, empowers communities to support their ongoing health needs or challenges, and engages with community leaders to share in program design and decision-making.

**INNOVATION**. The project supports new or enhanced programs or strategies. Requests for the continuation of existing programming or general operating expenses will not be competitive.

**LONG-TERM IMPACT**. The project has the potential to achieve significant long-term impact by implementing effective models or supporting needed innovation.

**MEASURABLE OUTCOMES**. The project has clear outcomes and the potential to have a measurable impact on improving health or quality of life.

**STRATEGIC ALIGNMENT**. The project aligns with the Health Fund's mission, strategies, and goals and with the priorities in the RFP.

# A NOTE ON INDIRECT COSTS

We consider overhead or indirect costs to be expenses that are necessary for an organization to support a project but not directly related to execution of the project.

Some examples:

- **Administrative office functions:** finance and accounting support, human resources, general IT services, and fundraising
- **Costs to operate the organization's physical office or space:** rent and occupancy expenses, and utilities
- **General business expenses:** hardware, software, or equipment necessary for normal business operations; bank and credit card fees; and corporate insurance policies
- **Subcontractor or consultant management fees,** outside of the necessary costs to directly oversee or guide the subcontractor or consultant's work on the project

# INDIRECT COST POLICY

- Applicant organizations with annual operating budgets **less than \$10 million** may request **up to 30%** of the total grant request
- Applicant organizations with annual operating budgets **at or above \$10 million** may request **up to 20%** of the total grant request
- The maximum is calculated on the **total request amount**, not the total direct costs. Example:
  - If an organization applies for a \$100,000 grant, they can request up to \$20,000 or \$30,000 of that for indirect costs, depending on the size of their annual operating budget.



# CAPACITY BUILDING: NON-GRANT RESOURCES

- Catchafire
- Data & Evaluation Mini-Lessons
- Policy Map

More information is shared here. Scan the QR code:



## Q&A PART 2

- To ask a question, select the Q&A icon on your screen and type your question.
- Please don't pitch specific ideas—submit a concept paper!
- We will answer as many questions as time allows.
- In a few days, we will post a FAQ document to our website, including those we don't have time to answer.
- More info can be found on our website: [www.mihealthfund.org](http://www.mihealthfund.org).

# Key Contacts

## **Behavioral Health:**

Becky Cienki: [Becky@mihealthfund.org](mailto:Becky@mihealthfund.org)

Drew Murray: [Drew@mihealthfund.org](mailto:Drew@mihealthfund.org)

Sarah Wasil: [Sarah@mihealthfund.org](mailto:Sarah@mihealthfund.org)

Grace Brooks: [Grace@mihealthfund.org](mailto:Grace@mihealthfund.org)

## **Application Process\*:**

Grants Management: [grants@mihealthfund.org](mailto:grants@mihealthfund.org)

*\*Concept papers, Fluxx questions, general grant process wisdom*

## **Capacity Building:**

Veronica Marchese: [Veronica@mihealthfund.org](mailto:Veronica@mihealthfund.org)