

CALL FOR APPLICATIONS:

Remote Hypertension Control Grants

Applications Due: Monday, September 15, 2025, by 5:00 p.m. CT

Support eligible Wisconsin-based health care organizations or systems to establish remote patient management programs for patients with hypertension toward effective blood pressure monitoring, management, and improvement in blood pressure control



AW ADVANCING A HEALTHIER
WISCONSIN ENDOWMENT

Overview

Advancing a Healthier Wisconsin Endowment Overview

At the Advancing a Healthier Wisconsin Endowment (AHW), we are driven by a vision for a healthier Wisconsin.

As Wisconsin’s largest health philanthropy, AHW seeks to propel the most promising work and ideas to improve health and advance health equity in Wisconsin today, and for generations to come. From urban centers to rural and agricultural communities and self-governed tribal nations, we are committed to maximizing the health of ALL Wisconsinites. We do that by providing funding and resources to researchers, organizations, and communities devoted to the health and well-being of the people they serve.

We accelerate innovation, collaboration, and impact by fueling research- and community-identified opportunities. Learn more about [our story](#) and AHW’s [areas of focus](#).

Funding Summary

AHW’s *Call for Applications: Remote Hypertension Control Grants* aims to support coordinated, community-based health care organization or system efforts toward remote blood pressure monitoring, management, and improvement in blood pressure control. Eligible Wisconsin-based health care organizations or systems may request up to \$300,000 for projects completed within a three-year period, beginning Jan. 1, 2026.

Application Process Timeline

August-September 2025

Consult with AHW to review proposed project scope and fit with the call for applications

By August 29, 2025

Share draft application with AHW for feedback

September 15, 2025 (required)

Applications due by 5:00 p.m. CT via the online application form

Within three business days of signature request (required)

Electronic signatures due from key personnel via an AHW-initiated DocuSign process

September-October 2025

Review and conditional approval process

November 2025

Notification of funding decisions

January 1, 2026

Project start date

Application Component Checklist

Please see pages 6-8 below for more details on the following required application components:

- ✓ Online form
- ✓ Narrative (attachment to online form)
- ✓ Budget workbook (attachment to online form using AHW-provided form)
- ✓ Budget justification (attachment to online form using AHW-provided form)
- ✓ Non-supplanting attestations (attachment(s) to online form using AHW-provided form)
- ✓ IRS verification letter (*if applicable*; attachment to online form)
- ✓ Signatures (collected via DocuSign after the application is submitted)

Funding Details

Description

AHW's Remote Hypertension Control Grants funding opportunity supports coordinated, community-based health care organization or system efforts toward remote blood pressure monitoring, management, and improvement in blood pressure control. AHW seeks to catalyze scalable, financially self-sustaining models capable of serving large numbers of patients and delivering measurable and positive clinical and economic impact. Eligible health care organizations or systems can request up to \$300,000 for projects to be completed during a three-year period, beginning Jan. 1, 2026.

AHW is committed to supporting new and innovative ideas that advance health equity in Wisconsin. [Health equity \(CDC\)](#) is the state in which everyone has a fair and just opportunity to attain their highest level of health.

Heart disease is the leading cause of death in all regions of Wisconsin. The number one risk factor for heart disease is hypertension (high blood pressure). More than 1.4 million residents of Wisconsin have high blood pressure (BP). Less than 30% are at their BP goal. But most could be. Given the evidence base for effective approaches to BP control, including remote BP monitoring and team-based care, applicants are encouraged to focus on these strategic funding areas:

- Home BP measurement technology that works for everyone and integration of home readings into electronic medical record systems and clinical workflows; data visualization and curation to support team-based care.
- Coordinated team roles (e.g., referring physicians, patient educators and remote patient monitoring (RPM) or remote patient care (RPC) coordinators at health care organizations with external RPM/RPC vendor technical and clinical teams).
- Billing system infrastructure and execution for sustainability of RPM/RPC.

Applicants must commit to working with Cadence, the selected RPC partner. RPC selection criteria included positive patient outcomes and patient experience, efficient data relay and data integration with electronic health record (EHR) systems and support for reimbursement/revenue workflows. Specifically, Cadence Core program attributes include:

- Proven outcomes and savings: In >55,000 monitored patients, health systems using Cadence achieved a 27% reduction in hospital admissions and ~\$1,300 average annual savings per patient (latest peer-reviewed outcomes can be found here: <https://www.sciencedirect.com/science/article/pii/S2772963X25003126>)
- Accessible patient experience: Pre-configured, cellular-enabled BP cuffs require no smartphone or Wi-Fi; >85 % of patients transmit readings each month.
- Extended clinical model: A multidisciplinary team (physicians, NPs, RNs, MAs) follows protocols co-developed with each health system to deliver 24/7 monitoring, proactive lab orders, and medication adjustments, without adding clinic burden.
- Seamless EMR integration: Bidirectional connections with Epic, Cerner, and Athena embed dashboards, clinical notes, and auto-generated billing documentation.
- Sustainable reimbursement: Cadence drafts compliant RPM, CCM, and APCM claims in EMR and invoices only after reimbursement, ensuring a net-positive program.

Proposal Considerations

- Engagement with Cadence

- All applicants must commit to executing a contract directly with Cadence.
- Applicants are encouraged to designate a senior clinical leader to work directly with Cadence.
- Applicants must have installations of Epic, Athena or Cerner electronic medical record systems.
- There is no capital commitment or upfront fees for a health care organization or system to engage with Cadence.
- All applications must clearly demonstrate how the proposed project will positively affect health and health equity in Wisconsin in the long-term.
- All applications must be submitted by an eligible Wisconsin-based health care organization or system who will be paired with an MCW academic partner upon funding to collaboratively carry out the proposed project.
- Project aims must be distinct from existing funded projects.
- AHW funding is project-specific and not for general organizational support.
- AHW funds operate through a cost-reimbursement model.
- It is not the intent of AHW funds to be used as bridge funding.

Applicant Eligibility

AHW is committed to supporting collaborative efforts that bring together teams with the necessary expertise, experience, and influence to address Wisconsin's leading health challenges and who together can advance health and health equity for all Wisconsin residents. Upon funding, the funded health care organization or system serving as the primary community partner organization will be connected with an MCW academic partner to support the project to achieve its overall goal and advance health. Funding for the MCW academic partner will be provided in addition to the approved community partner budget for the health care organization or system.

Primary Community Partner Organization

All projects must designate one primary community partner organization that is a Wisconsin-based health care organization or system to serve as the fiscal agent for the project and one individual from that organization to serve as the primary contact for the project. At least one representative of the Wisconsin-based health care organization or system must contribute effort to the project for the full award period.

The primary community partner organization is responsible for the fiduciary and reporting requirements of the community portion of the project and project budget and shares the responsibility with the MCW academic partner for transferring all communications, notifications, and instructions from AHW to all members of the project team. Eligible organizations must be a Wisconsin-based 501(c)3 health care organization or system, or a Wisconsin government-based entity or organization.

Collaborators

Collaborators are optional and are not subject to the same eligibility requirements as the primary community partner organization. Collaborators may be MCW faculty, staff, or students as well as experts outside of MCW, including additional community partner organizations and contacts. Collaborators typically have a smaller role in the project than the primary community partner organization and MCW academic partner and may or may not receive salary support through AHW funding. Any MCW faculty or staff listed as collaborators cannot be included in the primary community partner organization budget request. Any individual and/or organization listed as a collaborator should be committed to the proposed project and ready to engage in the project based on their specified role, if funded.

Budget Requirements

AHW's investment in this funding opportunity will total approximately \$2,000,000 to support approximately 4-6 meritorious projects. Successful projects will demonstrate an appropriate budget and timeframe for their proposed scope of work. Applicants will be required to provide a detailed budget with justification for all personnel and project expenses. Budget requests are limited to \$300,000 maximum, and project durations are limited to three years maximum.

- Project personnel salaries supported by AHW awards are subject to the applicable [NIH salary cap](#) at the project start date.
- At least one representative of the Wisconsin-based health care organization or system is required to contribute effort to the project for the full award period.
- Award personnel may cost-share their effort with support from their organization or entity. Cost-sharing may support any or all salary put forth. AHW funds may not be used to cost-share effort on any other work.
- All personnel support must be justified, and specific project roles outlined in the budget justification. AHW funds cannot support general operational activities.

Supplanting Criteria

AHW was established as the result of a generous financial gift made by Blue Cross & Blue Shield United of Wisconsin to the people of Wisconsin, giving AHW the extraordinary responsibility to steward this financial gift on behalf of Wisconsin residents. As such, AHW adheres to requirements as defined in a March 28, 2000, Order of the Commissioner of Insurance, which requires that AHW funds (the Funds) "may not be used to supplant funds or resources otherwise available." AHW, via MCW, must report annually on its determination that the Funds do not supplant other resources that may be available to accomplish the same purposes. A [supplanting guide](#) can be found on the AHW website.

Prior to final funding recommendations and approval, AHW and/or its oversight body, the MCW Consortium on Public and Community Health (Consortium), will assess whether other financial resources exist or are available for the project. Applicants must certify that no financial resources will be supplanted and provide a complete listing of current funding sources for the project or similar other projects.

Allowable Expenses and Funding Restrictions

AHW uses a cost-reimbursement model. Funds can only be used for direct project-specific expenses, including salary and benefits for personnel directly involved in the project and direct expenses such as supplies, travel, etc.

Funds may not be used for:

- Projects conducted outside of Wisconsin
- Indirect costs such as ongoing operating expenses for routine functions and principal programs
- Debt reduction
- Entertainment or alcoholic beverages
- Lobbying
- Reimbursement solely for patient care or clinical service delivery
- Publishing fees to benefit education or research in general
- Stipends and flat fees/rates
- Supplanting

View a complete list of [Allowable and Unallowable Costs](#) on the AHW website.

Application and Review Process

This funding opportunity uses a one-stage application and multi-stage review process.

Application Process

Eligible organizations should submit an application via the online application form available on the [AHW website](#). Applications must be submitted via the online form **by 5 p.m. CT on Monday, September 15, 2025**. Late applications will not be accepted.

Please use the following instructions to prepare the application for final submission via the online form by the deadline. Applicants must answer all required fields and follow the restrictions set within the online form. No paper or emailed applications will be considered, and no attachments beyond those specifically requested in the following instructions will be accepted.

When filling out the online form, you may save your progress and resume at a later time by checking “Save my progress and resume later” in the upper right-hand corner of the form. Please note that attachments will not save in the form and should be added at time of submission. If saving, please follow the system prompts to save and re-access the form. Only one applicant team member may begin and save the online form by creating a login (email address and password) that will allow that individual to return to saved work. We recommend you designate one individual to enter the completed application information online.

The application includes the following sections:

1. Online Form

The application form provides general project information and must be completed via the online form accessible on the [AHW website](#). The online form includes:

- Project title, goal statement, and project summary
- Requested award amount and project duration
- Primary community partner organization contact information, including attachment of the IRS verification letter for the organization (if applicable) that notifies a nonprofit organization that its application for federal tax exemption under Section 501(c)3 has been approved, and optional demographic information
- Optional collaborator information
- Geographic area impacted by the proposed project
- Implementation plan listing the proposed project-specific aims and objectives

2. Narrative (attachment)

The narrative is the applicant’s opportunity to describe their project in detail. Project narratives must be uploaded as an attachment in the indicated location within the online form. Responses to all sections of the narrative are required, and the narrative is limited to a maximum of six (6) pages, not including citations, using 0.5” margins and 11-point font, single-spaced.

Organize the narrative in the order specified below. Start each section with the appropriate section heading (bolded below), address each sub-point in your narrative response for that section, and use lay-friendly language as much as possible. We encourage applicants to be clear and concise, and insert graphics, tables, and charts when applicable and within the allowable page limit.

- **Project Need and Intended Impact**
 - Briefly describe the health need that the project aims to address and why the identified need is a priority for the target Wisconsin community(ies) that the proposed project intends to impact, including cited evidence of the health need for the target population
 - Describe the target population(s) to be impacted and health outcome to be achieved
 - State the larger vision and impact on the health of Wisconsin's people and communities that this project will contribute towards achieving
- **Project Aims and Approach**
 - Describe in detail the key activities and processes toward accomplishing one or more of the strategic funding areas outlined in the [Funding Description](#) above and in alignment with the proposed project-specific implementation plan included in the online form
- **Project Participants and Evaluation Strategies**
 - Outline how the project participants (e.g., health care organizations, health care providers, health workers or health navigators, health system navigators) will be identified and engaged
 - Explain the evaluation strategies and key process and outcome metrics that will be used to assess the project outcomes to inform future efforts
- **Project Team**
 - State the roles and responsibilities of each project team member
 - Briefly describe the experience or expertise for each project team member that makes them best suited to carry out their role on the proposed project
 - Describe how the project team will ensure a successful collaboration and how the applicants anticipate the partnership evolving during the project and beyond
- **Citations** (not included in the page limit)
 - Include all references cited in the narrative
 - Each reference should include the names of all authors, the article and journal title, book title, volume number, page numbers, and year of publication
 - Applicants should be especially careful to follow scholarly practices in providing citations for source materials used in the preparation of the application

3. **Budget Workbook** (attachment using the AHW-provided form accessible on the funding opportunities page on the [AHW website](#))

Applicants must complete the Community Partner Budget table (tab 2) following the guidelines detailed in the Budget Instructions (tab 1) in the budget workbook (Excel). The total budget amount on the Community Partner Budget table must equal the amount requested for the project on the online form and, if the amounts do not match upon submission, AHW will use the total project budget amount in the budget workbook as the final request amount as long as it does not exceed the \$300,000 maximum request.

When developing the budget, please refer to the detailed Budget Instructions (tab 1), the complete list of [Allowable and Unallowable Costs](#) on the AHW website, and the Budget Requirements section above.

4. **Budget Justification** (attachment using the AHW-provided form accessible on the funding opportunities page on the [AHW website](#))

Applicants must complete the budget justification form (Word) and must include descriptions of all funded positions and all direct expense line items included in the budget workbook.

Applicants should follow the guidelines and descriptions provided in the Budget Instructions (tab 1) in the budget workbook.

5. **Non-Supplanting Attestations** (attachment using the AHW-provided form accessible on the funding opportunities page on the [AHW website](#))

Non-supplanting attestations are used to identify existing or available funding for the proposed project and to determine whether such existing or available funding would be replaced with financial support by AHW funds. A separate non-supplanting attestation form must be completed by all key project partners, including:

- Wisconsin-based health care organization or system serving as the primary community partner
- Any additional project partners labeled as investigators within the application

6. **Signatures**

Following successful submission of the completed application through the online form and technical review, signatures will be required via an AHW-initiated DocuSign process from the following individuals to indicate their awareness and support of the submitted application:

- Primary contact for the Wisconsin-based health care organization or system serving as the primary community partner and an individual authorized signer, if applicable
- Any additional project partners labeled as investigators within the application and completing a non-supplanting attestation

Following submission and technical review, each of the individuals above will receive an email with instructions to complete and submit their electronic signature. **Required signatures must be submitted within three business days of receiving the signature request** to complete the submission and advance it for review. AHW will send DocuSign requests as soon as possible, but please note that it may not be sent immediately. Any delays in AHW initiating the DocuSign process will be accommodated for when considering signature deadlines.

Review Process

Technical Review

Submitted applications will undergo technical review by AHW staff to ensure that all requirements are met, including but not limited to eligibility criteria and adherence to the guidelines and restrictions. AHW will follow up with all applicants as part of the technical review process. Applicant teams should be prepared to respond quickly to communications from AHW following the application deadline.

Merit Review

Merit reviews will be conducted for applications that pass technical review by a review body consisting of community and MCW reviewers.

Programmatic Review

Applications that pass technical review will be reviewed for alignment with the call for applications and AHW funding requirements to ensure that funded projects are set up for successful efforts.

Review Criteria

All applications will be reviewed using the following criteria:

Impact

The proposed project:

- Demonstrates the potential to positively impact health in Wisconsin, either as a direct result of project activities or over the long-term
- Describes innovative approaches and planned evaluation or assessment to directly inform future efforts to advance health in the long-term

Feasibility

The proposed project:

- Is led by a community partner and additional collaborators, as applicable, who appear to bring the necessary experience and expertise to carry out the project
- Demonstrates high-quality, appropriate methods that appear likely to achieve the stated aims
- Describes a scope which appears feasible to complete within the requested project budget amount and duration

Alignment

The proposed project:

- Addresses an important health-related issue in the field, explains why it is a priority, and includes cited evidence of the health need for the target population
- Appears to be aligned with the intent of the call for applications and the strategic funding areas outlined in the [Funding Description](#)

Reviewers will provide scores and written comments for each proposal. The scoring system uses a nine-point scale based on the rating scale used by the National Institutes of Health. The nine-point rating scale is anchored according to the following descriptions:

- | | |
|--|--------|
| 1. Exceptional (exceptionally strong with essentially no weaknesses) | High |
| 2. Outstanding (extremely strong with negligible weaknesses) | |
| 3. Excellent (very strong with only some minor weaknesses) | |
| 4. Very Good (strong but with numerous minor weaknesses) | Medium |
| 5. Good (strong but with at least one moderate weakness) | |
| 6. Satisfactory (some strengths but also some moderate weaknesses) | |
| 7. Fair (some strengths but with at least one major weakness) | Low |
| 8. Marginal (a few strengths and a few major weaknesses) | |
| 9. Poor (very few strengths and numerous major weaknesses) | |

- Minor Weakness: An easily addressable weakness that does not substantially lessen impact
- Moderate Weakness: A weakness that lessens impact
- Major Weakness: A weakness that severely lessens impact

Consortium Review

The MCW Consortium on Public and Community Health (Consortium) will review the recommendations from the reviewers and approve a slate of proposals to fund. AHW may request that applicants adjust their proposal based on the outcome of the review process. If necessary, these applicants will be notified and asked to resubmit their

adjusted application materials for further review. No negotiations or appeals will be accommodated. Final funding decisions will be advanced to the MCW Board of Trustees for approval.

Conflict of Interest

Each review process follows a conflict of interest policy. A conflict of interest is apparent whenever a reviewer's objectivity may be perceived as compromised by the nature of a personal or professional relationship or obligation to an applicant. Reviewers with a conflict of interest pertaining to a proposal's review and/or funding are self-identified and recused from review of that proposal.

Award Determination

Following completion of the review process, notification of conditional award determination is anticipated to be shared with the primary community partner organization contact in November 2025.

Following award determination, funded projects will be connected with AHW's hypertension faculty champion to serve as the MCW academic partner and support collaboratively conducting the project by the community-MCW academic partner team.