# Reducing Health Care Disparities through Payment and Delivery System Reform

Brief Proposal Applicant Webinar



#### Housekeeping

- Please hold all questions for the Q&A session at the end of the conference
  - You may type questions into the chat box (bottom left) at any time
  - We will organize and answer chat questions at the end
  - Please submit one question at a time
- Recordings of today's call will be available online



#### **Robert Wood Johnson Foundation**

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- Anne Weiss, MPP
- Steve Theisen, MSM

**Program Officer** 

Team Director and Senior Program Officer

**Program Financial Analyst** 



## Program Office at the University of Chicago

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- Scott Cook, PhD
- Robert Nocon, MHS
- Rachel Voss-DeMeester, MPH
- Morgan Ealey, BA

Director

**Deputy Director** 

Senior Health Services Researcher

Program Manager

Program Administrator



#### Agenda

- Call For Proposals (CFP), 15 min
  - Application Process
  - Funding Details
  - o Program Goals
  - Eligibility & Selection Criteria
- Timeline, 5 min
- Online application system, 5 min
- Question and answer session, 30 min



### **Call For Proposals**

#### \*IMPORTANT\*

#### Complete information is in the CFP

http://www.rwjf.org/cfp/req

Today's discussion is a brief review and an opportunity to answer questions. Please use the CFP itself as you complete your application.

#### **Application Process**

- All phases are submitted through the online application system: <u>www.myrwjf.org</u>
- Brief Proposal
- Full Proposal
  - A small group of brief proposal applicants will be invited to submit full proposals.
- Virtual Visits
  - A small group of full proposal applicants will be invited to complete a virtual visit.
  - Virtual visits allow reviewers and applicants to work out questions before making the final decisions.
- Final decisions (up to 3 awards)



#### **Grant Funding**

- Up to three (3) grants
- Each grant can be funded up to \$500,000 in total, over the space of three years



#### **Program Goals**

- Many experiments in delivery system and payment reform
  - Attempt to lower costs and improve quality
- Few experiments in reform + disparities
  - How do innovations in delivery/payment reform impact disparities of health and health care?
  - How might we design delivery/payment models explicitly to reduce disparities?
- Goal: Discover evidence of reforms that can improve overall quality and efficiency and also reduce health care disparities
  - Successfully manage extrinsic and intrinsic incentives



#### **Eligibility: Active Collaboration**

- Have an active collaboration that includes:
  - At least one payer (e.g., health plan, insurance company, employer, government payer)
  - One or more provider / health care organizations (e.g. health centers/clinics, provider organizations, hospitals, network of physician offices, regional coalition of providers and health care organizations).
- Single integrated delivery system and health plan? YES
- Multi-payer partnerships? YES



#### **Eligibility: Targeted Disparity**

#### Document at least one disparity

- Health care processes
  - e.g., screening for colorectal cancer, appropriate prescription of inhalers in patients with asthma, appropriate screening for depression
- Clinical outcomes
  - e.g., adequate control of blood pressure in patients with hypertension, readmissions for heart failure, patient experience scores
- Outcomes of patient experience
  - e.g., quality of communication between patient and clinician



#### Eligibility: Targeted Disparity (cont.)

- Describe the targeted health condition
  - Describe processes and outcomes that will be measured
- Demonstrate a large and diverse patient population
  - Ensure that progress can be measured and monitored
  - o Examples:
    - One organization with large and diverse patient mix (measure change over short period of time)
    - Integrated or accountable care-like network of hospitals and other providers (look across sites)



#### Eligibility: Payment Model

- Propose to adapt at least one existing or nearly fullydeveloped payment reform initiative
  - Payment model should already be at least partly operational by the participating payer to avoid significant delays
- Describe how the payment reform model moves away from traditional fee-for-service (value-based alternative)
  - E.g., shared savings arrangements, population-based payments, and bundled/episode-of-care payments; or value-based purchasing, pay-for-performance, or patient centered medical homes that include reimbursement reform linked to outcomes-based performance measurements.



#### Eligibility: Disparities Intervention

- Propose at least one delivery system change or quality improvement initiative designed to reduce disparities
  - How will those activities be supported through the proposed payment reform?
  - At least one component of the payment model must directly support specific disparities-reduction goals
- Document the impact of interventions on cost



#### Eligibility: Spread and Evaluation

- Describe which elements of the intervention design are generalizable or could be translated to other settings
- Participate in data collection and an external evaluation
  - o 3<sup>rd</sup> party evaluator
  - Share interim and final findings with RWJF, the University of Chicago program office, and evaluation staff



#### **Highlighted Selection Criteria**

- Readiness
- Organizational Buy-in and Partnerships
- Firm grasp on the target population/condition
- Intervention design
- High-quality data and realistic measures proposed



#### **Key Dates**

Brief proposal due

April 18, 2014 at 3:00pm ET

Applicants notified

May 15, 2014

Full proposal due

June 12, 2014

Applicants notified

July 18, 2014

Virtual Visits

August 4-August 8, 2014

3 days to revise

Final awards notification

August 26, 2014

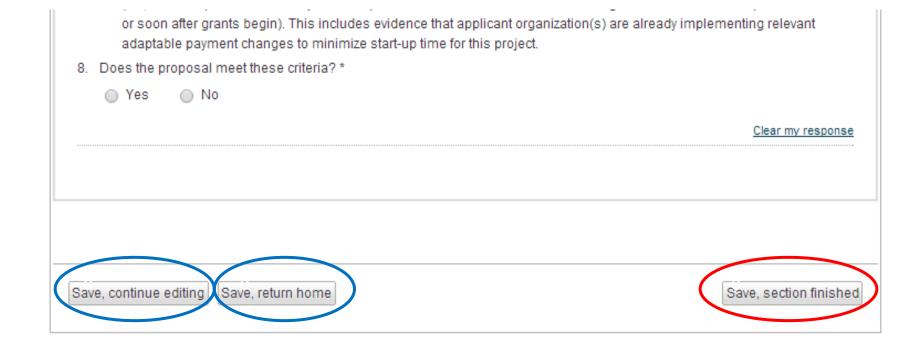
Grants begin

October 15, 2014



## **Online Application System**

#### Saving





#### **Submitting**

#### Reducing Health Care Disparities through Payment and Delivery System Reform

D: 28424 📙 Print Proposal

#### **Brief Proposal Home**

Reference
Applicant Guide
Call for Proposals
FAQs
Troubleshooting Tips
Contact Us

Welcome to the RWJF online grant application system for Reducing Health Care Disparities Through Payment and Delivery System Reform. As you work on your proposal, you can save a partially completed section at any time. When you are finished working on a section use the "Save, section finished" button to indicate that section is complete. All sections must be marked as finished for the submit button to be activated. Deadline: Apr 18, 2014 03:00 PM ET 35 days remailing Status Description Section Review the eligibility criteria and indicate whether the applicant meets these Eligibility Criteria conditions. Provide information specific to the applicant organization. Applicant Organization Provide contact information for key project members. Key Contacts Provide project summary information. Project Summary Project Information Questions As appropriate, please respond to the questions listed. Brief Proposal Narrative Provide a brief proposal narrative for your project. Provide supporting documents for your proposal. Supporting Documents Proposal status: In Progress Last updated on 03/07/2014 by Marianne M. Meyer

#### **Question and Answer Session**

#### To submit a question:

- ■Type into the chat box (written questions)
- ■Press 14 on your phone (verbal questions)
  - The operator will ask for your name so they can announce the question.
  - When your question is finished, you'll be placed back into listen-only mode.

#### **Contact Us**

- CFP website: <a href="http://www.rwjf.org/cfp/req">http://www.rwjf.org/cfp/req</a>
  - o CFP
  - Details for future webinars
  - Recordings of these webinars
- Online application system: <a href="www.myrwjf.org">www.myrwjf.org</a>
- Email (preferred): <a href="mailto:payment@solvingdisparities.org">payment@solvingdisparities.org</a>
- Phone: (866) 344-9800

