

2017 Call for Proposals

Proposal Deadline: June 23, 2017 (3 p.m. ET)



Robert Wood Johnson Foundation

RESEARCH IN TRANSFORMING HEALTH AND HEALTH CARE SYSTEMS

BACKGROUND

The Robert Wood Johnson Foundation is committed to its vision to help build a Culture of Health—where all are enabled to lead healthier lives, now and for generations to come. We believe that access to quality health care systems is essential to good health—and is not possible without affordable, quality health insurance coverage. The Foundation’s new Research in Transforming Health and Health Care Systems (RTHS) call for proposals (CFP) seeks to fund rigorous, empirical studies that evaluate or predict the potential effects of policies or policy changes intended to transform health and health care systems. While there is consensus that more reform is needed to improve the value of the U.S. health care system, questions remain around the optimal mechanisms to achieve these goals. For example, how can we promote greater affordability and stability in the individual insurance market? What does the evidence suggest about the effectiveness of benefit design strategies and consumer engagement in health care decision-making? How are safety-net health systems responding to alternative payment models and coverage expansions?

PURPOSE

The 2017 RTHS CFP will focus on empirical and policy-relevant analyses that can inform strategies to ensure access to high-quality, affordable health care and insurance coverage. We will prioritize proposals for research that are timely and that will directly inform the policy process. Applicants should consider the timeliness of the proposed research questions at both the time of submission and when findings are expected to be released. Specific proposals could focus on themes and research questions including the areas of interest listed below, but we encourage proposals outside these suggested areas that are both policy relevant and reflect the changing policy environment. Proposals should address specific research questions and contribute significant, new information to the evidence base.

1. Individual Market Affordability and Stabilization
 - What factors explain the state-level variation in terms of successes and failures of individual marketplaces under the Affordable Care Act (e.g., why did some but not all marketplaces witness large premium increases and declining insurer participation)?
 - In markets with only one or no major insurers participating, what are the consequences and possible remedies to ensure affordability and encourage competition?

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- How can high-risk pools be optimized to ensure coverage of high-risk, medically complex patients?
- What modifications to special enrollment periods could encourage competition and affordability of the health insurance marketplace?
- What are effective models for risk adjustment and reinsurance in the individual market?

2. Medicaid and the Safety Net

- In March 2017, Secretary Thomas Price and CMS Administrator Seema Verma *released a letter* to state governors that signaled an interest in using Section 1115 authority to approve innovations in “training, employment, and independence” requirements. What would be the impact of these requirements? What can be learned from other social programs with these requirements in place? Do states have the capacity to administer job-training programs or work requirements?
- What would be the impact of provisions to increase flexibility in the Medicaid program (e.g., allowing states to waive essential health benefits or the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit)?
- What would be the impact of moving children in the Children’s Health Insurance Program (CHIP) into Medicaid, and vice versa?
- What has been the effect of coverage expansions on safety-net providers’ finances and patients’ access to and quality of care? Do the newly insured continue to see the safety-net providers who treated them previously, or go elsewhere now that they are insured?
- How have safety-net health systems responded to alternative payment models? How are they performing in these new financial arrangements?

3. Benefit Design Strategies and Consumer Engagement

- What are optimal design features of health savings accounts that encourage consumer engagement in health care spending while not discouraging patients from seeking needed care?
- How does value-based insurance design impact health disparities?

TOTAL AWARDS

- Up to \$600,000 will be available under this CFP.
- Project funding will range from \$50,000 to \$150,000 to accommodate studies of six–12 months. Preference may be given to rapid-turnaround projects that can be completed within six months, although the study timeline should be appropriate for the proposed objectives.
- Up to six studies will be funded.

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ELIGIBILITY CRITERIA

Researchers, as well as practitioners in the public and private sector working with researchers, are eligible to submit proposals through their organizations. Projects may be generated from disciplines including health services research, economics, sociology, program evaluation, political science, public policy, public health, public administration, law, business administration, or other related fields.

The Foundation may give preference to applicants that are either public entities or nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundations or Type III supporting organizations. The Foundation may require additional documentation. Applicant organizations must be based in the United States or its territories.

DIVERSITY STATEMENT

Consistent with RWJF values, this program embraces diversity and inclusion across multiple dimensions, such as race, ethnicity, gender, disability, age, and socioeconomic status. We strongly encourage proposals in support of candidates and organizations that will help us expand the perspectives and experiences we bring to our work. We believe that the more we include diverse perspectives and experiences in our work, the more successful we will be as we strive together to build a Culture of Health, enabling all in our diverse society to lead healthier lives, now and for generations to come.

SELECTION CRITERIA

- Importance and policy relevance of the question to be addressed and potential to contribute significant new information to the evidence base.
- Strength of the proposed methodology and incorporation of reasonable and relevant empirical methods.
- Appropriateness and availability of proposed data sources.
- Qualifications and expertise of the applicant.
- Ability to inform decision-makers and other key stakeholders (e.g., policymakers, academia, industry) and create timely deliverables for wide dissemination (e.g., issue briefs, webinars, blog posts, fact sheets), including products based on preliminary findings and throughout the life of the grant, in addition to papers suitable for peer-reviewed publication.
- Appropriateness of the timeline and budget.

MONITORING

RWJF monitors the grantees' efforts and careful stewardship of grant funds to assure accountability. Grantees will be required to submit a final narrative and financial report, and additional narrative or financial reports may be requested during the project if needed.

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APPLICANT SURVEY PROCESS

To help us measure the effectiveness of RWJF grantmaking and improve the grant application experience, we will survey the Principal Investigator (PI) listed in proposals submitted under this call for proposals. Shortly after the proposal deadline, the PI will be contacted by Princeton Survey Research Associates International (PSRAI), an independent research firm, and asked to complete a brief, online survey about the application process and applicant characteristics. This voluntary questionnaire will take no more than 15 minutes to complete. Responses provided to PSRAI will not impact the funding decision for the proposals in any way.

PSRAI will protect the confidentiality of the responses. RWJF will not receive any data that links a name with the survey responses. If you have any questions about the survey or the use of the data, feel free to email applicantfeedback@rwjf.org.

USE OF GRANT FUNDS

Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct project expenses. In keeping with RWJF policy, grant funds may *not* be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, for political activities, or as a substitute for funds currently being used to support similar activities.

HOW TO APPLY

All applicants should log in to the system and familiarize themselves with online submission requirements well before the submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, the program will not accept late submissions.

Please direct inquiries to transformhealth@rwjf.org. Be sure to include your phone number. We will make every effort to respond to all inquiries within 24 hours.

Applicants must submit a fully developed proposal, which should be no more than 10 pages, double-spaced, and should contain the following information about the proposed project:

- Research question and policy relevance/significance to the field
- Data sources and data acquisition plan
- Methodology
- Qualifications and expertise of the applicant
- Deliverables and plan for dissemination

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- **Budget**

Applicants must submit a full proposal of no more than 10 pages accompanied by a line-item budget and budget narrative. Full proposals will undergo peer review by two external, subject-matter experts as well as staff at RWJF and AcademyHealth.

PROGRAM DIRECTION

Responsible staff members at the Robert Wood Johnson Foundation are:

- Mona Shah, PhD, *program officer*
- Alexis Levy, *senior communications officer*
- Stephen Theisen, *senior program financial analyst*

Direction and technical assistance for this program are provided by AcademyHealth, which serves as the national program office located at:

Research in Transforming Health & Health Care Systems

AcademyHealth
1666 K Street NW, Suite 1100
Washington, DC 20006
Phone: (202) 292-6795
Email: transformhealth@rwjf.org

Responsible staff members at AcademyHealth are:

- Bonnie Austin, JD, MPH, *vice president*
- Megan Collado, MPH, *director*

KEY DATES AND DEADLINES

June 23, 2017 (3 p.m. ET)
Deadline for receipt of full proposals.*

September 25, 2017
Notification of finalists.

2017 Call for Proposals

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December 1, 2017

Grants start.

* All proposals for this solicitation must be submitted electronically. Visit www.rwjf.org/cfp/rths and use the *Apply Online* link. If you have not already done so, you will be required to register at <http://my.rwjf.org> before you begin the application process. All applicants should log in to the system and familiarize themselves with online submission requirements well before the final submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, the program will not accept late submissions.

ABOUT THE ROBERT WOOD JOHNSON FOUNDATION

For more than 40 years the Robert Wood Johnson Foundation has worked to improve health and health care. We are working with others to build a national Culture of Health, enabling everyone in America to live longer, healthier lives. For more information, visit www.rwjf.org. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.

Sign up to receive email alerts on upcoming calls for proposals at www.rwjf.org/manage-your-subscriptions.html.

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