Eligibility Requirements

To be eligible for this opportunity, the project narrative must align with the goals described above AND the Principal Investigator (PI) must meet the following requirements:

1. Hold a Doctorate or Master’s Degree in health services research, social sciences, medicine, law, or other related field
2. Have a primary appointment (51% time or more) at a not-for-profit college, university, policy institute, foundation, think tank, or state/territory/tribal agency
3. Demonstrate evidence of having designed and conducted research on health disparities and health equity, and reported the results for projects of similar size and scope as the applicant proposes for this effort
4. Obtain CMS Privacy Board approval within one month of award and complete the project within 36 months
5. Commit to meeting twice a year (via conference call) with CMS OMH.
6. Commit to submitting at least two manuscripts to a peer-reviewed journal describing the findings of the study

Data Availability

CCW contains the following 100% Medicare files for years 1999 - 2017:

- Fee-for-service institutional and non-institutional claims
- Enrollment/eligibility
- Assessment data
- 100% Medicaid files for years 1999 – 2016
- 100% Part D Prescription Drug Event data for years 2006 - 2017
- Plan characteristics
- Pharmacy characteristics
- Prescriber characteristics
- Formulary file - beginning with year 2010
- Other Research files – www.ccwdata.org

Request Process

**Step 1 - Determine project eligibility:** Interested researchers should submit a project narrative following the specifications described in the application instructions document below. Please send the project narrative to HEResearch@cms.hhs.gov with the subject line of ‘Health Equity Research Request Summary.’ CMS will accept submitted materials until xxxxxx.
Step 2 – Request CMS data: Upon notification of seat award, the researcher will receive notice from CMS with additional information on how to work with ResDAC to follow the normal research request process. Researchers must receive CMS Privacy Board approval to conduct their project within six months of notification of seat award.

APPLICATION REQUIREMENTS

The project narrative should not exceed ten typewritten, double-spaced pages. Please ensure that the project narrative is page-numbered (1-10). Each narrative must include all contents described below (Project Narrative Format) in the order indicated, and conform to the following specifications:

- Use 8.5” x 11” letter-size pages (one side only) with 1” margins (top, bottom, and sides). Other paper sizes will not be accepted. This is particularly important because it is often not possible to reproduce copies in a size other than 8.5” x 11”
- All pages of the project narrative must be paginated in a single sequence
- Font size must be at least 12-point with an average of 14 characters per inch (CPI)
- If tables are included, they should have a font size of at least 12-point with 14 CPI and may be single spaced. Tables are counted towards the applicable page limits
- Outside letters of support are NOT necessary

PROJECT NARRATIVE FORMAT

The application should be written using the following format:

- Relevance, feasibility, and potential impact
- Methodology
- Ability to implement the research project
- Institutional structure, capabilities, and budget support

a) Relevance, Feasibility, and Potential Impact

The application must demonstrate that the applicant has a thorough understanding of the specific health problem(s) within the population identified. The applicant should clearly describe the proposed project explaining what the researcher plans to do and why. This section of the application must describe the:

- Background, significance, review of literature, and need for the project
- Project purpose, goals, and objectives
- Relevance of the project to CMS’s mission/programs
- Feasibility – Does the applicant demonstrate knowledge of CMS data sufficient to ensure that the research question is appropriate and may be addressed in a sound, scientific manner using CMS data?
- Potential impacts - What insights will the project provide that may improve the overall health outcomes and quality of care, reduce health disparities, and/or achieve savings for the targeted population (Medicare, Medicaid, or CHIP programs)?
b) Methodology

The applicant should explain how the research team intends to implement the project. The applicant should make a complete and concise presentation of the methodology that will be implemented in this project. The proposal should provide clear and convincing evidence and supporting materials that reflect how the project is likely to improve quality of care and reduce health disparities for the targeted population. Any innovative features of the proposed project should be highlighted. The application must include:

- Study design
- Hypotheses/research questions
- Data analysis plan
- Targeted population and setting
- Expected outcomes

c) Ability to Implement the Research Project

The applicant should provide detailed information to demonstrate their technical understanding and capability of performing the requirements of the project, including:

- A detailed implementation strategy and plan that includes a management plan (work plan) describing tasks, responsible individuals, and timelines
- The capabilities/responsibilities of all personnel and a description of how the personnel will be organized, to whom they will report, and their role in accomplishing the goals, objectives, and components of the project

d) Institutional Structure, Capabilities, and Budget Support

The applicant should demonstrate clear and convincing evidence that the eligible entity has the organizational infrastructure and management capacity to conduct the research project effectively, including:

- Evidence of the availability and adequacy of the facilities, equipment, staffing, and financial management systems to conduct the project for the entire three years.
- Should an award be granted, changes and staffing that affect this research should be reported. For example, reduction of staff or change in budget that would limit the ability to conduct research using HEDAP data.