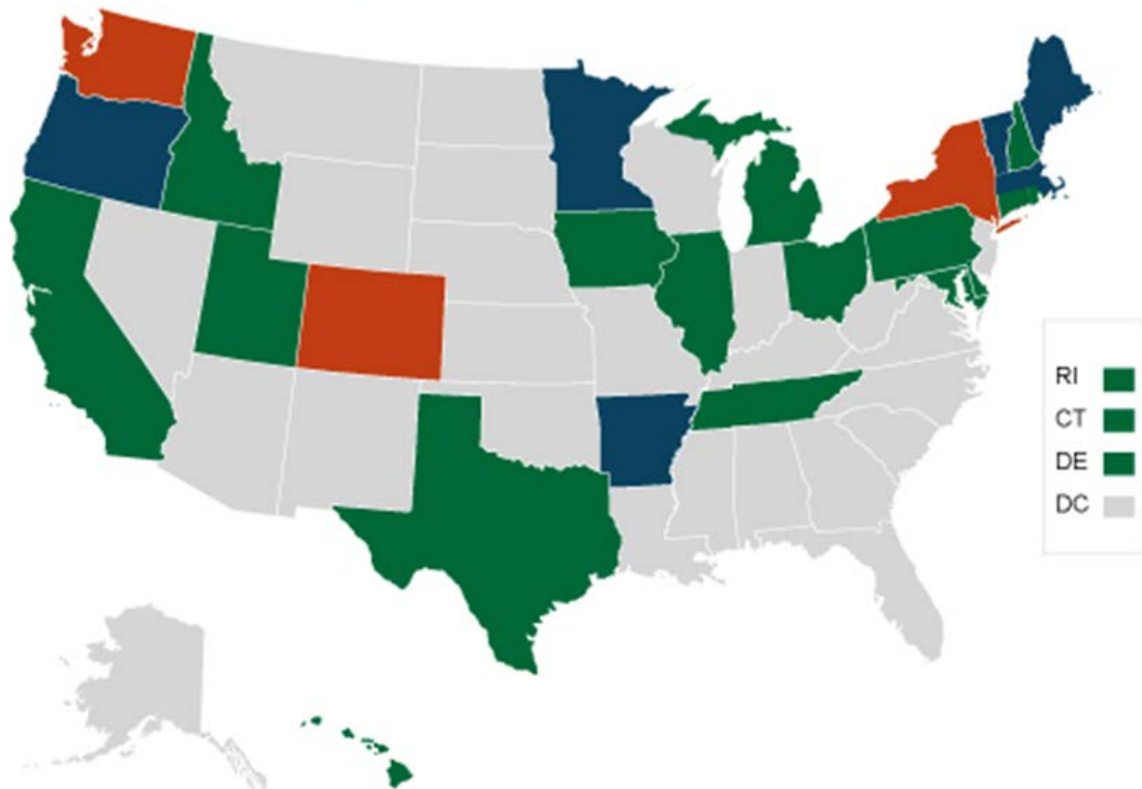


State Innovation Models Initiative Round 2 Webinar: Model Test Proposal Format Requirements, the “Population Health Plan” Portion of the Model Test Proposal, and the Population Health Plan Deliverable of the Model Test Project Period

 Model Testing Awards  Model Pre-Testing Awards  Model Design Awards



Wednesday, July 2, 2014
4:15pm-5:15pm EDT

Source: Centers for Medicare & Medicaid Services

Agenda

- Model Test Project Narrative
- Reminders: Page Limits & Format Requirements
- Proposal Requirements: “Population Health Plan” portion of the Model Test Project Narrative
- Clarification of Appendix 1 of the Round Two Funding Opportunity Announcement (“FOA”)
- An expected deliverable of the Model Test Cooperative Agreement: Plan for Improving Population Health
- Core Population Health Metrics
- Technical Assistance from the Centers for Disease Control and Prevention (“CDC”)
- Additional Resources
- Important Dates

Model Test Project Narrative (Slide 1 of 2)

- The Model Test Project Narrative consists of 9 parts:
 - 1) Plan for Improving Population Health
 - 2) Health Care Delivery System Transformation Plan
 - 3) Payment and/or Service Delivery Model
 - 4) Leveraging Regulatory Authority
 - 5) Health Information Technology
 - 6) Stakeholder Engagement
 - 7) Quality Measure Alignment
 - 8) Monitoring and Evaluation Plan
 - 9) Alignment with State and Federal Innovation
- **See pages 26-32 of the FOA:**
[http://innovation.cms.gov/Files/x/StateInnovationRdT
woFOA.pdf](http://innovation.cms.gov/Files/x/StateInnovationRdT
woFOA.pdf)

Model Test Project Narrative (Slide 2 of 2)

- The entire Project Narrative (Parts 1-9) is limited to **29 double-spaced pages**
- Parts 1 through 5 of the Project Narrative are limited to a total of **18 double-spaced pages**
 - Population Health Plan
 - Health Care Delivery System
 - Payment and/or Service Delivery Model
 - Leveraging Regulatory Authority
 - Health Information Technology
- Part 6 of the Project Narrative is limited to **3 double-spaced pages**
 - Stakeholder Engagement
- Part 7 of the Project Narrative is limited to **3 double-spaced pages**
 - Quality Measure Alignment
- Part 8 of the Project Narrative is **limited to 4 double-spaced pages**
 - Monitoring and Evaluation Plan
- Part 9 of the Project Narrative is limited to **1 double-spaced page**
 - Alignment with State and Federal Innovation

Reminder: Model Test Application

Page Limits

- Model Test applications must not be more than **55 pages in length**.
- This total includes the:
 - Project Narrative: must be double-spaced, **29 pages max**
 - Budget Narrative: must be double-spaced, **12 pages max**
 - Financial Analysis: may be single-spaced, **4 pages max**
 - Operational Plan: may be single-spaced, **10 pages max**
- This maximum page limit includes all supporting materials, including:
 - Documentation related to financial projections
 - Profiles of participating organizations, etc.
- Standard forms, the project abstract, the Governor's Letter of Endorsement, and attestations of support from payers and stakeholders are NOT included in the 55-page limit.

Reminder: Format Requirements

(See pages 25-27 of the FOA)

- Must use 8.5" x 11" letter-size pages with 1" margins on all sides
- All pages of the Project Narrative must be paginated in a single sequence
- Font size must be 12-point with an average character density no greater than 14 characters per inch
- The Project Abstract is restricted to a one-page summary, which can be single-spaced

Part 1 of the Model Test Project Narrative: “Plan for Improving Population Health”

- Part 1 of the Model Test Project Narrative is identified as the “Plan for Improving Population Health” in the FOA (page 28)
- *This part of the Project Narrative serves as a basis for a **deliverable** of the 48-month Model Test cooperative agreement project period: **A final, actionable, Plan to Improve Population Health***
 - A “Plan for Improving Population Health,” a “Plan to Improve Population Health,” and a state-wide “Population Health Plan” are synonymous terms.

Appendix 1 (Pages 62-66) of the FOA: “Plan for Improving Population Health”

- Appendix 1 of the FOA describes what a finalized, actionable, ***Plan to Improve Population Health*** looks like.
- The “format” elements identified in Appendix 1 of the FOA (pages 64-66) do **NOT** apply to Part 1 of the Model Test Project Narrative portion of the application.
- Rather, the format elements prescribed in Appendix 1 apply to a complete, finalized and actionable ***Plan to Improve Population Health***

Content of a Finalized *Plan to Improve Population Health*

- As described in Appendix 1, a finalized, complete *Plan to Improve Population Health* should:
 - Outline goals, objectives and strategies that align with the population health metrics that have been developed by the CMMI/CDC team, posted here:
<http://innovation.cms.gov/Files/x/SIMPopHlthMetrics.pdf>
 - Include the evolving role of new models of health care delivery such as Patient Centered Medical Homes, Accountable Care Organizations and Accountable Care Communities to improve population health
 - Include interventions that are evidence-based and focus on the general population, high risk groups, and/or groups experiencing disparities in health conditions and/or outcomes
 - Include strategies that will be led by both governmental and non-governmental partners

Content of a Finalized *Plan to Improve Population Health*, Continued...

- A finalized, complete *Plan to Improve Population Health* should:
 - Include goals, objectives and interventions that are specific, measurable, achievable in a specific time period, realistic, and time bound.
 - Include a population health needs assessment based on surveillance and epidemiology reports from the state and local health departments, hospital community health needs assessments, and data provided to awardees by the CDC.
 - Describe interventions selected, why the interventions were selected, and the evidence that supports the chosen interventions as proven, effective, or promising. If a key need identified in the needs assessment is not selected, the Plan should explain why.
- Additional elements of a finalized *Plan to Improve Population Health* are described in Appendix 1.

What should an applicant include in Part 1 of the Model Test Project Narrative? (Slide 1 of 2)

- **The “Plan for Improving Population Health” portion of a Model Test applicant’s Project Narrative should:**
 - Describe *how* the applicant will develop a state-wide Plan to Improve Population Health before the conclusion of the 48-month project period.
 - Describe *how* the applicant will ensure that its final Plan to Improve Population Health will integrate population health strategies with public health officials and health care delivery systems for all populations.
 - Describe *how* the applicant intends on addressing the core measures identified in the Population Health Metrics document in its final Plan to Improve Population Health.
 - Describe *how* the applicant will consider integrating state strategies to address child wellness and prevention priorities, as applicable.

What should an applicant include in Part 1 of the Model Test Project Narrative? (Slide 2 of 2)

- In the “Plan for Improving Population Health” portion of a Model Test applicant’s Project Narrative, an applicant could describe:
 - Who will lead the effort
 - What data will be used
 - How stakeholders will be engaged
 - A timeline for development of the Population Health Plan
 - Governance
 - Policy considerations
 - Sustainability plans

An Expected Deliverable of a Model Test Cooperative Agreement

- By the end of the 48-month project period, Model Test awardees are expected to:
 - Deliver to CMS a finalized “Plan for Improving Population Health,” consisting of the elements outlined in Appendix 1 of the Round Two FOA.
 - Begin to operationalize and implement their finalized Plan for Improving Population Health.

Core Population Health Metrics:

<http://innovation.cms.gov/Files/x/SIMPopHlthMetrics.pdf>

- The Core Population Health Metrics focus on three priority areas: tobacco use, diabetes care, and obesity.
- These metrics were selected based on the following three criteria:
 1. High population burden and societal costs
 2. Amenable to interventions with the potential to improve health, improve quality of care and decrease costs within the next three to five years
 3. Data for the measure are available for major segments of the population at the state and/or sub-state level.

Core Population Health Metrics

- In the Model Test Project Narrative, the applicant should describe how it intends on addressing/incorporating measures within the three priority areas (tobacco use, diabetes, obesity), identified in the Core Population Health Metrics document, in its final ***Plan to Improve Population Health***
- Refer to Appendix 1 of the FOA for additional guidance on how a final, complete, ***Plan to Improve Population Health*** should incorporate the Core Population Health Metrics

Technical Assistance

The CDC will work collaboratively with the Innovation Center to provide ongoing technical assistance to SIM Round 2 Model Test awardees in developing and refining their final ***Plans to Improve Population Health.***

Additional Resources

- National Prevention Strategy:
<http://www.surgeongeneral.gov/initiatives/prevention/strategy/>
- Agency for Health Care Research and Quality's Guide to Clinical Preventive Services:
<http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/index.html>
- CMMI Priority Measures for Monitoring and Evaluation
<http://innovation.cms.gov/Files/x/PriorityMsrMontEval.pdf>

Important Dates

- Electronic Cooperative Agreement Application due date: **July 21, 2014, by 5:00p.m., EDT**
- Anticipated Notice of Cooperative Agreement Announcement Date: **October 31, 2014**
- Anticipated Cooperative Agreement Period of Performance for Round Two Model Test: **January 1, 2015, to December 31, 2018 (inclusive of a pre-implementation period of up to 12 months)**

Agency Contacts

Programmatic Contact Information

All programmatic questions about the State Innovation Models Initiative must be directed to the program e-mail address: stateinnovations@cms.hhs.gov. The submitter may direct a follow-up question to:

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation
Phone: 410-786-8950 or e-mail: Leah.Nash@cms.hhs.gov

Administrative Questions

Administrative grant questions about the State Innovation Model initiative may be directed to:

Grants Management Specialist, Gabriel Nah
Centers for Medicare & Medicaid Services
Office of Acquisitions and Grants Management
Phone: 301-492-4482 or email: Gabriel.Nah@cms.hhs.gov

Thank You



Send Questions to: StateInnovations@cms.hhs.gov

State Innovation Models Initiative Homepage: <http://innovation.cms.gov/initiatives/State-Innovations/>

FAQs: <http://innovation.cms.gov/initiatives/State-Innovations/State-Innovation-Models-Initiative-Frequently-Asked-Questions.html>