

**Transforming Clinical Practice Initiative
Support and Alignment Networks 2.0 Funding Opportunity
Announcement Frequently Asked Questions**

General

Q: What is the Transforming Clinical Practice Initiative (TCPI)?

A: The Transforming Clinical Practice Initiative is a \$685 million initiative under the Centers for Medicare & Medicaid Services (CMS) designed to support 140,000 clinicians in sharing, adapting, and further developing comprehensive quality improvement strategies, which are expected to lead to greater improvements in patient health and reduction in health care costs.

The initiative aligns with the ideas for innovative models set forth in the Affordable Care Act:

- Promoting broad payment and practice reform in primary care and specialty care,
- Promoting care coordination between providers of services and suppliers,
- Establishing community-based health teams to support chronic care management, and
- Promoting improved quality and reduced cost by developing a collaborative of institutions that support practice transformation.

To date, there has been no large-scale investment in a collaborative peer-based learning initiative designed to facilitate and evaluate the success of practice transformation – an investment that ensures that clinicians who participate will be part of leading and creating positive change for the entire health care system.

Q: What is the purpose of the initiative?

A: The purpose of the initiative is to engage clinicians in facilitating practice transformation in an effort to reduce program expenditures under Medicaid, Medicare, and CHIP while enhancing the quality of care provided by the clinicians. Through quality and process improvements, practice transformation tools and collaborative shared-learning networks, clinicians will be better positioned to provide high-quality care in a dynamic health care system. The Transforming Clinical Practice Initiative uses similar approaches as the Partnership for Patients (PfP) and Quality Improvement Organizations (QIO) to support delivery of high-quality care that is evidence-based, efficient, coordinated, and patient-centered. TCPI focuses on ambulatory care and ambulatory care sensitive condition. PfP focuses on acute care and hospital- based services.

Programs and models, such as the PfP initiative with Hospital Engagement Networks, the Hospital Value-Based Purchasing Program and Accountable Care Organizations (ACOs) are striving to help clinicians and hospitals move from volume-based towards patient-centered quality health care services. This has resulted in fewer unnecessary hospital readmissions, reductions in healthcare-associated infections and hospital-acquired conditions, and improvements in quality outcomes and cost efficiency.

Information from this model will be used to promote broad and rapid dissemination of evidence- based and best practices that have the potential to deliver higher quality and lower cost care for Medicare, Medicaid, and CHIP beneficiaries.

Q: When did the TCPI start?

A: CMS announced the launch of the TCPI on October 23, 2014. CMS announced 29 Practice Transformation Network and 10 Support and Alignment Network awards in September 2015.

Q: Whom do I contact for questions regarding the model?

A: Information about the TCPI is available at [http://innovation.cms.gov/initiatives/Transforming- Clinical-Practices/](http://innovation.cms.gov/initiatives/Transforming-Clinical-Practices/). Specific questions that are not answered in the fact sheet or funding opportunity announcements should be directed to transformation@cms.hhs.gov.

Q: Can a clinician practice apply for a Support and Alignment Network 2.0 cooperative agreement award?

A: No. Clinicians are not eligible to apply for funding under the cooperative agreements. However, clinicians are highly encouraged to participate in the program through partnerships with the networks.

Q: How are the Practice Transformation Networks and Support and Alignment Networks different?

A: The Practice Transformation Networks will coach, mentor, and assist clinicians in developing core competencies as they move through the TCPI phases of practice transformation. The Support and Alignment Networks will provide a system of national, state, and regional professional associations and other supports that align programs and platforms of continuing medical education, maintenance of certification, patient and family engagement, and other work with the overarching aims of the TCPI. These networks will support clinician members and play an active role in the alignment of new and shared learning.

Q: Is CMS announcing a funding opportunity for additional for Practice Transformation Networks?

A: No, not at this time.

Support and Alignment Networks 2.0

Q: What's the total funding amount for the Support and Alignment Network 2.0 cooperative agreements?

A: CMS expects to award up to a total of \$10 million over three years, depending on availability of funds.

Q: How much funding is available for each award under these cooperative agreements?

A: CMS expects to make awards ranging from approximately \$500,000 to \$2.5 million each to cover a three-year period of performance.

Q: Are Letters of Intent required? If so, when is the Letters of Intent due?

A: Yes, a Letter of Intent is required. The letter of intent is due on July 1, 2016. Letters of Intent should be submitted to transformation@cms.hhs.gov.

Q: How many Support and Alignment Network 2.0 cooperative agreement awards will be funded?

A: CMS expects to award up to five Support and Alignment Network 2.0 cooperative agreements.

Q: Who is eligible to apply to be a Support and Alignment Network 2.0?

A: Eligible applicants are organizations including health care delivery systems and health care delivery plans that: 1) presently provide quality improvement support to a large number of clinicians; 2) are multi-regional or national in scope; 3) are involved in generating evidence-based guidelines for clinical practice; 4) are effectively using measurement through clinical registries and electronic health records; and 5) are committed to expanding action to improve safety and person and family engagement. Medical professional associations and specialty societies may also apply. SANs are required to enroll 5,000 clinicians.

Q: When is the application due date?

A: The application due date is July 10, 2016. Applications must be submitted through www.grants.gov by 3 p.m. Eastern Standard Time on the due date.

Q: What is the maximum length of the application?

A: The application should not exceed 30 pages.

Q: Can current Practice and Transformation Networks and Support and Alignment Networks apply to be a Support and Alignment Network 2.0?

A: Organizations that have current Practice Transformation Network and Support and Alignment Network awards may not apply for the Support and Alignment Network 2.0 Funding Opportunity Announcement.

Q: What is the performance period for the Support and Alignment Network 2.0?

A: The performance period is from September 30, 2016 to September 29, 2019.

Support and Alignment Networks 2.0 Applicant Information Session (June 28, 2016)

Q: How does CMS define multiregional impact?

A: Multiregional refers to more than one of the Health and Human Services regions. <http://www.hhs.gov/about/agencies/regional-offices/index.html#>.

Q: Would participation in the Medicaid Delivery System Reform Incentive program in New York make a practice ineligible to participate in TCPI?

A: These clinicians are eligible to participate in TCPI.

Q: If an organization applied for TCPI PTN last year but WAS NOT awarded, is that organization eligible to apply for SAN 2.0?

A: Yes, organizations not receiving an award previously for a PTN or SAN can apply for SAN 2.0. The organization must comply with the eligibility requirements of SAN 2.0.

Q: Is there a specific format or form for the Letter of Intent (LOI)?

A: No, however there are specific requirements to be included in the letter which is identified in section V.2.1. FOA and as follows:

- Organization Name
- Street Address, including City, State and Zip
- Organization Type
- Number of Years in Business
- Description of Organization's Mission and Work
- Organization's Tax ID Number (TIN)
- Organization's Dun and Bradstreet Number (DUNS), if available (This must be obtained and provided to submit an application.)
- Organization's System for Award Management (SAM) number, if available (This must be obtained and provided to submit an application.)
- Point of Contact name and contact information including phone and email address
- How many clinicians in Phase 4 or 5 do you plan to recruit?
- Of these, how many have a pre-existing formal arrangement with you?

Q: Is the minimum number of clinicians to be served by any one grantee 5,000? What if your proposal serves less than 5,000 clinicians?

A: In accordance with the FOA, competitive applications will have signed commitments to enroll a minimum of 5,000 eligible clinicians and their practices that are in advanced states of readiness to deliver high quality care at lower costs (e.g. transformation Phases 4 and 5) that are not currently enrolled in a PTN.

Q: Please clarify if Letters of Intent are required or encouraged. Conflicting language between the FAQs, RFA and website.

A: Yes, a Letter of Intent is required. The letter of intent is due on July 1, 2016. Letters of Intent should be submitted to transformation@cms.hhs.gov.

Q: Would a health analytics firm be considered? The firm has ability to model VBP models to access readiness and select best VBP model?

A: Eligible applicants are organizations including health care delivery systems and health care delivery plans that: 1) presently provide quality improvement support to a large number of clinicians; 2) are multi-regional or national in scope; 3) are involved in generating evidence-based guidelines for clinical practice; 4) are effectively using measurement through clinical registries and electronic health records; and 5) are committed to expanding action to improve safety and person and family engagement. Medical professional associations and specialty societies may also apply. SANs are required to enroll 5,000 clinicians.

Q: Application is limited to 30 pages. We want to partner with existing SAN grantees who will be giving us letters of support. Do those letters count in the 30 pages?

A: Letters of support are not required, and attachments beyond the page limitation and required standard forms are not accepted.

Q: How is this grant different from the grant to Help Small Practices Prepare for the Quality Payment Program?

A: SAN 2.0 is not limited to small, rural, medically underserved practices.

Q: Our organization has several thousand clinician members, do we need to sign them up?

A: In accordance with the FOA, competitive applications will have signed commitments to enroll a minimum of 5,000 eligible clinicians and their practices that are in advanced states of readiness to deliver high quality care at lower costs (e.g. transformation Phases 4 and 5) that are not currently enrolled in a PTN.

Q: Are grant recipients allowed to augment their initiative and add additional support not previously delineated in the grant proposal or must they restrict it to the items listed in the grant proposal?

A: Organizations that have current Practice Transformation Network and Support and Alignment Network awards may not apply for the Support and Alignment Network 2.0 Funding Opportunity Announcement.