

Health Care Innovation Awards Round Two

**Information taken from CMMI web-accessible resources*



HCIA Round 2 Goals

- Identify new payment and service delivery models that result in better care and lower costs for Medicare, Medicaid, and CHIP enrollees (and other payers if possible)
- Like Round 1: Must show ROI for CMS over the 3 year period (costs of model in relation to expected savings)
- Must propose new Medicare, Medicaid and CHIP payment models
- 4 innovation categories

Innovation Category 2 Description

- Improve care for populations with specialized needs. Priority areas:
 - High-cost pediatric populations
 - Children in foster care
 - Children at high risk for dental disease
 - Adolescents in crisis
 - Persons with Alzheimer's disease
 - Persons living with HIV/AIDS
 - Persons requiring long-term support and services
 - Persons with serious behavioral health needs

Innovation Category 4 Description

- Improve the health of a population
 - Geographic (health of a community)
 - Clinical (health of those with specific diseases)
 - Socioeconomic class
- Funds activities focused on engaging beneficiaries, prevention, wellness, and comprehensive care that extends beyond the clinical service delivery setting and addresses the social determinants of health
- May include CBOs, coalitions
- May leverage current community health improvement efforts

Innovation Category 4 Priorities

- Comprehensive population-based interventions
- Integration of clinical care with community-based interventions that focus on the underlying determinants of health
- Integration of behavioral health care and primary care

Innovation Category 4 Priorities, cont.

- Prevention & control of cardiovascular disease, hypertension, diabetes, chronic obstructive pulmonary disease, asthma, HIV/AIDS
- Promotion of behaviors that reduce risk for chronic disease, including physical activity & nutrition
- Promotion of medication adherence & self-management skills
- Prevention of falls among older adults

Other “Priorities”

- ❑ Rural & underserved areas (p. 9)
- ❑ Reduce health disparities (p. 24)
- ❑ Reduce effects of multiple co-morbidities (p. 24)
- ❑ Test scalability of proven models to new/broader populations (p. 9)
- ❑ Capability to implement care improvement activities within 6 months of award or less (p. 10)

Other “Priorities”, cont.

- Data analytics & technological approaches (p.9)
- Promote interoperability and exchange of health information across disparate organizations, providers & stakeholders (p. 36)
- Develop open source technology or software for public domain (p. 9, 36)

Eligible Applicants

- Provider groups
- Health systems
- Payers
- Community collaboratives
- For-profit organizations
- Community-based organizations
- Conveners assembling & coordinating the efforts of a group
- Current CMMI awardees (including Round 1) *provided proposals do not duplicate models that CMS or other HHS entities are currently testing in other initiatives*
- States
- Local governments
- Public-private partnerships
- Private sector organizations
- Faith-based organizations

Timeline

- June 14, 2013: Templates for supplemental materials & Applications available on <http://innovation.cms.gov>
- June 28, 2013: (non-binding) LOIs due electronically by 3:00 PM EDT
- Aug 15, 2013: Application due electronically by 3:00 PM EDT
- Jan 15 & 31, 2014: Anticipated announcement dates
- Feb 28, 2014: Anticipated Notice of Cooperative Agreement Award
- April 1, 2014–March 31, 2017: 3 year Cooperative Agreement Period

Components

- Theory of change/action & evidence base
- Target population description/geographic area (including recruitment strategy, outreach and education)
- Specific services/intervention(s) (i.e., service delivery model)
- Partners/stakeholders & community integration plan

Components, cont.

- Proposed design of a new **payment model**. A fully developed payment model is required by the end of the award as well as a plan for engaging multiple payers.
- **Financial plan that estimates a favorable return on investment** for CMS -- How will the program ultimately reduce the cost of care?
- E & M plan with measures for improved quality of care, improved outcomes and reduced costs

Resources

Register for webinar 6/18 covering categories 3 and 4 on CMMI website, Round 2 page:

<http://innovation.cms.gov/initiatives/Health-Care-Innovation-Awards/Round-2.html>