

# Center for Healthcare Transparency

## Innovation Pilot Selection Process and Criteria

### Overview

The Center for Healthcare Transparency's purpose is to make meaningful and reliable provider cost and quality information readily available for 50% of the US by 2020.

Starting in May 2014, the Center will lead an 18 month planning process to develop a blueprint to ensure meaningful and actionable information on healthcare costs and quality can be produced for all stakeholders. This is an ambitious goal that will be accomplished in partnership with key federal and state agencies and by building upon existing regional healthcare cost and quality data aggregation and measurement efforts, such as state APCDs, Regional Health Improvement Collaboratives and Medicare Qualified Entities.

The Center envisions a federated, national network of such locally governed regional entities that will make data readily accessible - with appropriate safeguards - to public and private purchasers, providers, consumers, health plans and other stakeholders seeking to use information to transform care. Each region of the US would be served by a data utility that operates within national requirements and uses national standards, while maintaining local autonomy and governance. The data from these utilities would assist (1) public and private purchasers in administering pay-for-value programs, (2) providers and community organizations in implementing practice transformation and improvement, and (3) the general public in making more informed health care decisions.

The nonprofit Center is a partnership between the Network for Regional Healthcare Improvement (NRHI) and the Pacific Business Group on Health (PBGH). An Executive Committee that includes leading thinkers from Regional Health Improvement Collaboratives, purchasers, providers, health plans, the Department of Health and Human Services, Office of the National Coordinator and others is overseeing the project. The project is initially funded by the Laura & John Arnold Foundation.

The Center is funding up to three research projects ranging from \$250,000 to \$500,000 to develop and evaluate novel methodological approaches to making high value performance information available to the public over the next six years, building upon a federated data infrastructure. The studies must provide practical and effective instructions describing how the Center can accelerate adoption of successful innovations. Some examples of these issues include:

- Integrating ancillary health data, such as prescription drug and laboratory results, with claims and administrative data for use in healthcare quality measurement
- Using claims or clinical registry data to identify patient groups for patient reports, or to identify candidates for survey follow-up (provider ratings, patient experience, and health outcomes)
- Building and deploying new methods, such as online or mobile methods, of collecting timely patient survey information

- Integrating Patient Experience Data at the individual physician level and developing a national strategy for patient experience surveying
- Developing methodologies to blend healthcare cost and quality measures across multiple regions, multiple payers, and multiple episodes of care
- Identifying ways to produce an information set that is a meaningful and comparable combination of doctor-specific patient experience ratings and clinic/group clinical ratings
- Working with EHR vendors to build and test API/interfaces to transmit selected ambulatory EHR performance data into a regional data warehouse.

The Center will award funding to proposals that provide concrete, feasible, scalable solutions to problems like these.

### **Minimum Requirements**

- Pilot must address an issue that is prioritized as important by the Center Executive Committee.
- Final pilot results must be available twelve months after the award has been made, with priority given to projects that deliver final results sooner.
- It must be practically and financially feasible to implement solutions and recommendations at regional data centers nationwide.
- Awardee must be willing to allow access to and publication of sufficient detail about the approaches recommended so that they can be fully implemented by a national network of regional participants. This might include intellectual property, data specifications or interfaces, analytics, measures, contracts, legal documents, software tools, or data presentation templates required to fully implement the described solution.
- Preference will be given to solutions with public domain licenses, but financially feasible commercial licensing will be considered for exceptional solutions.
- Awardee must demonstrate adequate data privacy and security safeguards where applicable, including any required insurance coverage.
- Pilot objectives must be achievable within the stated timeline and budget.

### **Proposal Scoring Criteria**

- **Impact (40% weight)**
  - addresses critical barriers to healthcare transparency
  - affects broad and diverse populations
  - improves ability to evaluate physician and medical group performance
- **Dissemination and Scalability (20% weight)**
  - problem and solution are both clearly defined and the solution addresses the problem
  - pilot results are generalizable to the entire US population
  - applies across geographical regions
  - all necessary licenses are in the public domain or affordable on a national scale
  - potential problem areas are identified and alternative tactics are considered

- **Innovation (20% weight)**
  - addresses issues arising from the federated model
  - enables novel approaches in priority areas, such as data integration, cost and quality measures, or data collection
  - addresses existing issues in new and promising ways
- **Success Factors (10% weight)**
  - likely to succeed (feasible, scalable, flexible)
  - content and technical expertise to conduct the proposed project
  - experience with any data or analytics required
  - experience with similar subject matter
- **Budget and Timeline (10% weight)**
  - budget is reasonable relative to the scope of activities and timeframe
  - Whether the solution relies upon receipt of additional funding sources and if so, the status of this funding

### **Award Process**

- Award decisions will be made by the Center Executive Committee using a defined scoring procedure.
- PBGH will manage the RFP process.
- This Request for Proposals may be freely distributed.
- Applicants must send an email to the PBGH contact declaring an intention to apply by Friday, July 11. The email should include contact information for a person that should receive correspondence concerning this Request for Proposal.
- Applicants may submit questions about this RFP to the PBGH contact via email before Friday July 18. All submitted questions and responses will be made available to all applicants that have declared their intention to apply.
- PBGH will accept applications via email until Friday July 25.
- Proposals that are judged to meet the minimum requirements will be scored.
- Awards will be made to up to three highly-scored proposals.
- Awards will be announced by personal email contact to awardees no later than Friday August 15.

### Response Format:

1. Applicant Information. Describe the persons or organizations making the application. Provide a contact person for correspondence concerning this Request for Proposal.
2. Project summary. A brief summary of the problem, the project, and the expected outcome.
3. Background. Describe the problem addressed by the proposed project, explaining its relevance to the Center objectives described herein.
4. Methods and Data. Describe how the proposed project will be accomplished, including any analytical methods, data collection, or existing data sources that are required.

5. Relevance of Findings. Explain how the pilot findings will address or inform the issues raised in the Background section.
6. Deliverables. Describe the output of the pilot project. Include a dissemination plan that addresses how the outputs will be made available to a group of regional participants, as well as any relevant costs or restrictions.
7. Workplan. A high-level workplan showing major task activities and milestones.
8. Budget. A complete budget for the entire project, showing all personnel expenses, materials costs, subcontracts, and professional expenses.
9. Personnel Qualifications. Curriculum vitae for all key project staff, including qualifications, and experience. Show percent time allocation on this project for each staff member for the entire project duration (1/2 time for 6 month project duration = 0.5 FTE, not 0.25 FTE). Identify a primary contact and provide contact information.

Please address all correspondence concerning this Request for Proposals to:

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