



# BRONX PARTNERS FOR HEALTHY COMMUNITIES



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## Innovation Fund Winter Round 2018 Informational Webinar

December 22, 2017

# Purpose

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- Bronx Partners for Healthy Communities (BPHC) is issuing an invitation to the member organizations to participate in the second round of the **Innovation Program Fund**
- The Innovation Fund was created:
  - To encourage **innovative strategies, new interventions and programs**
  - To support programs that will make a transformative difference in patient care and outcomes and that **do not currently have a funding stream**
- Proposals must show how the intervention has value – by **improving quality and performance or reducing cost – and is sustainable**
- BPHC will make **\$2M available** for the second round of the Innovation Fund

# Innovation Fund Winter Round 2018 Objectives

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## 1. Address High Impact Metrics through Sustainable Project Implementation

- Align the pilot programs with the most valued metrics
- Understand how to measure baselines, collect data and track changes in performance
- Target complex patients with co-morbidities

## 2. Increase Collaborations

- Engage in collaboration to better identify and effectively address social determinants of health
- Collaborations may engage BPHC member organizations as well as stakeholders and community experts

## 3. Inspire Policy Change

- Create new programs that could eventually drive change the way providers get reimbursed or the way care is regulated

# Population of Interest

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Please state which sub-population you would work with from the options below. The two sub-populations do not need to be mutually exclusive.

## a. Behavioral Health

- *Serious Mental Health (SMI)*
- *Substance Use Disorder (SUD)*

## b. Medically homeless, including supportive housing, transitional housing, respite, and shelters

## c. Justice-Involved

- *Re-entry population*
- *Recidivist population*



# Program Areas of Interest

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After choosing the population, please indicate the program area from the options below.

- a. **Care transition** alternatives to readmission, hospitalization and incarceration
- **Examples** include detox, opioid treatment, harm reduction, SUD care coordination/integration, collaboration between transitions and social services
- b. **(Re-)connecting** patients to care
- **Examples** include (re-)enrollment into Medicaid, Health Home transition for re-entry population, stabilization and improved access to housing (avoidable ED visits, connection to food, housing and employment services).



# Metric(s) of Interest

Finally, please indicate which metric(s) you would like to focus on, based on the population and program that you have selected.

<b>1</b>	Potentially Avoidable Readmissions (PPR)
<b>2</b>	Potentially Preventable ED Visits (BH) (PPV - BH)
<b>3</b>	Potentially Preventable ED Visits (PPV)
<b>4</b>	Follow Up after MH Inpatient (7 Days)
<b>5</b>	Follow Up after MH Inpatient (30 Days)
<b>6</b>	Engagement of Alcohol/Drug Treatment
<b>7</b>	Initiation of Alcohol/Drug Treatment
<b>8</b>	PDI 14 - Pediatric Asthma
<b>9</b>	PQI 15 - Asthma Younger Adults
<b>10</b>	PQI 1 - DM Short Term Complications
<b>11</b>	PQI 7 - Hypertension
<b>12</b>	PQI 8 - Heart Failure Admission Rate

# Proposals Must Demonstrate

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- a. How the application **defines the population to serve**, including its size and frequency of utilization
- b. How the applicant is qualified to work with the **population** of choice, the **program** of choice, and the **metric(s)** of choice
- c. How work will accelerate VBP readiness and help the PPS **achieve DSRIP targets**
- d. How work will drive **performance improvement**
- e. How the project will create new or strengthen existing **community collaborations**
- f. How the program will sustain the gains and achieve **financial sustainability post-DSRIP**
- g. How the proposal articulates **scalability** and/or plan of scaling up
- h. How the pilot is structured such that it is **spreadable within the PPS**
- i. How the pilot is strategically **budgeted with sustainability in mind**



# Submission Details

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1. A Member may submit up to five (5) proposals, each capped at \$250K. Max **one** proposal will be selected per Member
2. Each proposal **must be a pilot program** or best practice, which, depending on successful results and sustainability potential, could be scaled up and spread
3. We encourage the Members to **collaborate** with others
4. The Member's proposed 12-month initiative must include a timeline detailing all key activities and deliverables. It must commence no later than **3 months** after the contract is executed, and to limit the planning phase to be no more than **3 months**

# Submission Details *cont'd*

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5. The proposal **must include** the following sections:
  - a. Description of the project, including population, program and metric(s) of interest
  - b. Project Plan and Timeline
  - c. Outcome(s) targeted
  - d. Project budget and narrative
  - e. Evaluation methods to determine success, financial sustainability/ROI, and scalability

***\* Please do not include any supplementary material beyond the maximum limit of 5 pages; the Review Work Group will not review them.***

# Process for Selection

CSO will establish Review Workgroup comprised of CSO leads and selected members from the BPHC Project Advisory Committee (PAC).

## Proposed Timeline\*

▪ <b>Invitation to Participate</b>	<b>December 19</b>
▪ Informational Call	December 21 & 22
▪ Follow-up Q&A Call	January 8
▪ <b>Proposals Due</b>	<b>January 22</b>
▪ Vetting Sessions with Review Workgroup	January 25 – February 15
▪ Recommendations Presented to EC	February 22
▪ Selected Proposals Announced	February 26
▪ Contracts Issued	March 2
▪ Contracts Executed & Projects Commence	March 16

*\*Certain dates are subject to change at the CSO discretion*

# Innovation Fund Application Submission

All applications should be submitted through the Form Assembly link provided by BPHC.



**BRONX PARTNERS FOR  
HEALTHY COMMUNITIES**

Collaboration. Transformation. Outcomes

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**Contact Details for Person Submitting Application**

<b>First Name *</b>	<b>Last Name *</b>	<b>Title of Applicant *</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Phone *</b>	<b>Email *</b>	
<input type="text" value="###-###-####"/>	<input type="text"/>	
<b>Lead Organization *</b>		
<input type="text"/>		

# Innovation Fund Application Submission *cont'd*

## Proposal Details

Title of Proposal (Limit 50 Characters, including spaces) \*

Population of Interest – click as many as applicable \*

- Serious Mental Illness (SMI)
  Substance Use Disorder (SUD)
  Medically homeless/precariously housed
  Re-entry population
  Recidivist population

Program Area – click as many as applicable \*

- Care Transition
  Connecting and Re-connecting

Abstract (Limit 150 Words) \*

Pilot Key Word(s) – click as many as applicable \*

- Mental Health
  Serious Mental Illness (SMI)
  Substance Use Disorder (SUD)
  Alcohol and Other Drug Treatment (AOD)
  Re-entry Population
  Recidivist Population
  Medically Homeless
  Alternative to Incarceration (ATI)
  Medicaid Enrollment
  Emergency Department
  Readmission
  Care Coordination
  Care Transition
  Telemedicine
  Telepsychiatry
  Cardiovascular Disease (CVD)
  Diabetes
  Asthma
  Wellness
  Training
  Hospice
  Other

# Informational Webinars

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- Thursday, December 21<sup>st</sup>, 10-11 AM
- Friday, December 22<sup>nd</sup>, 9:30-10:30 AM
  
- Webinar Dial in and Link:
  - Phone #: 866-859-7687
  - Participant Passcode: 61260223#
  - Meeting Name: 12/21-12/22 - BPHC  
Innovation Fund Information and Guidelines
  - Meeting Passcode: dsrip
  - Meeting number: 741547734
  - Participant Join URL:  
<http://www.mymeetings.com/nc/join.php?sigKey=mymeetings&i=741547734&p=dsrip&t=c>



# Follow-up Q&A Call

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- There will be a follow-up Q&A call on **January 8<sup>th</sup>, 2018**
- Please send additional questions you may have, and we will cover them at the Q&A call
- Questions in the meantime? Please email:  
**J. Robin Moon:** [jrmoon@sbhny.org](mailto:jrmoon@sbhny.org)
- Questions about Form Assembly? Please email:  
**Bronte Kastenber****g:** [!\[\]\(998e30a8dcfb35e9b724d9eb41990449\_img.jpg\)](mailto:bkastenber</a><b>g@sbhny.org</b></li></ul></div><div data-bbox=)