



request for applications expanding access through team care

Important Dates

Informational Webinar (optional):

Thursday, February 13, 2014
11:30am –12:30pm (PST)
Register [here](#)

Applications Due:

By 5:00pm (PST), **Friday, March 14, 2014**

Notification of Grant Awards:

June 2014

How to Apply:

http://www.cybergrants.com/BSCF/TBC_2014

Eligibility – All applicants must:

- Be community health centers that receive core support funding from Blue Shield of California Foundation or county-operated clinics predominantly serving low-income Californians
- Currently deliver care through teams
- Have patients assigned to the panel of one primary provider, with a system of empanelment in place for at least six months
- Have implemented an Electronic Health Record system that has been live for at least six months
- Comply with other eligibility requirements on page 4 of the Request for Applications

Only one application per health center corporation or county system will be accepted.

Contract Information

Content Questions:

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Technical Questions:

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1. Background

Blue Shield of California Foundation's Mission: Improve the lives of all Californians, particularly the underserved, by making health care accessible, effective, and affordable, and by ending domestic violence.

To help fulfill our mission, Blue Shield of California Foundation (the Foundation) engages in grantmaking and programmatic activities that improve access to health care for low-income Californians and strengthen systems of care within the safety net. In recent years, the Foundation has made significant investments to support the state of California and counties in their efforts to expand health insurance coverage and take advantage of new opportunities created by the Patient Protection and Affordable Care Act (ACA). Already, California is on track to enroll over one million residents in Medi-Cal and over 500,000 in health plans offered through Covered California.

This historic expansion will place new pressure on California's safety net clinics to provide access to timely, high-quality care for low-income populations. When Massachusetts enacted health reform in 2006, it significantly reduced the number of uninsured residents, and the state's community health centers and safety net hospitals experienced a 14 percent increase in patient visits from 2008 to 2010. California's community health centers and county systems can expect to face a similar increase in demand as more state residents enroll in Medi-Cal and Covered California plans.

Safety net providers across the state are employing a number of strategies to prepare for this new demand. Many California health centers have won federal grants for new or expanded healthcare access points that enable them to care for more patients. In 2010, for example, the state's "Bridge to Reform" Section 1115 Medicaid waiver allowed counties to create Low Income Health Programs (LIHPs) that eventually enrolled almost 700,000 low-income adults in coverage and drove innovation in care coordination among the networks of safety net providers created to serve LIHP enrollees.

Another promising strategy to expand access to primary care is through the adoption of team-based care delivery models. In Fall 2013, the Foundation, in collaboration with Langer Research Associates, released the report [Building Better Health Care for Low-Income Californians](#), which found that team-based care positively predicts patient satisfaction and engagement. The data shows that patients who have a care team have a stronger relationship and better communication with their providers. The study also found that 80 percent of low-income Californians either currently use team-based care or are interested in trying it. In addition to this research, there is a growing body of evidence demonstrating the effectiveness of this model, which allows individuals working at the top of the licensure to take on more responsibilities, thus allowing primary care physicians to have more time to focus on patients. In this Request for Application (RFA), the Foundation is pleased to announce a new grantmaking opportunity for community health centers and county-operated primary care clinics in California to support these critical providers in expanding the use of team-based care models.

2. Expanding Access Through Team-Based Care

Through this RFA, the Foundation aims to expand access to care for the underserved by providing up to \$1 million in grants to California community health centers and county-operated clinics to develop or improve care teams. Foundation funding will support the testing and implementation of various team-based practices, including the following:

- **Care team huddles at the beginning of each patient session**, in order to plan and deliver complete care.
- **Clearly defined roles, and value each of them.** This increases efficiency and builds trust within the care team.
- **Effective practices to answer patient phone calls as they come in**, and to resolve patient needs by the end of each workday.
- **Active outreach and follow-up to engage patients**, to reduce no-show rates and to increase the likelihood that patients – especially those with chronic illness - receive recommended screenings, labs, and exams.
- **Collection and use of patient preferences to guide care.** Patient input should be used to guide the decisions and work of the clinic teams.
- **Same-day provider appointments.** Using data and technology, evaluate the number of same-day appointments needed by each care team and plan accordingly.
- **New ways of meeting patient needs**, in addition to in-person provider visits.

All grantees will participate in a nine-month program of technical assistance offered through the Center for Care Innovations (CCI). CCI will work closely with the selected grantees to provide coaching, peer convenings, and technical support to ensure grantees make progress against programmatic goals. The program will include:

- **Two all-day workshops:** Clinics will be trained on the science of appointment access, the process of developing and optimizing care teams, operations management, and the importance of using data to test and make sustainable changes. One workshop will be held in the Bay Area and one in the Los Angeles area.
- **Monthly webinars:** To support grantee teams with additional training and coaching to advance their practices, including improved appointment access.
- **Site visits:** To be organized for grantee teams to see high-functioning team models in action and learn from peers who have been doing the work in their own settings. At least two participants from each grantee team will be encouraged to attend at least one site visit (which may be outside of California) to bring new inspiration and ideas back to their organizations.
- **Peer learning network:** For participating clinics to learn from one another and troubleshoot potential challenges within the program cohort. CCI will seek best practices from beacons of better performance: other health centers, health care providers outside of the safety net, and models of excellent customer care and teamwork from other industries.
- **As-needed resources:** Program participants will also be able to leverage additional CCI resources, such as participating in its Safety Net Innovation Network and other learning opportunities.

3. Use of Funds

This RFA seeks to expand the implementation of team-based care models in California. In addition to the grant award, technical assistance, and mentorship, grantees are encouraged to implement additional innovations in their clinics that will improve the efficiency of their care teams and appointment systems. Examples of the types of activities that could be supported through this RFA include, but are not limited to:

- Experts to assist in the development and implementation of strategies and systems to facilitate team effectiveness, particularly those approaches that result in improved access to care and improved patient experience.
- Purchase and/or implementation of electronic and web-based tools and applications to improve the efficiency of care teams or appointment systems.
- Training of care teams in areas that contribute to greater patient access.
- Staff time to participate in trainings, lead local efforts, and to collect data and information critical for evaluating performance.

No matching contribution is required, although applicants are encouraged to identify in-kind support for the project that will be provided by clinic staff.

Grantees will be responsible for covering the cost of travel for the following events (approximately \$6,000-\$8,000/team depending on size, and should be included in your grant budget):

- Two workshops (one in the San Francisco Bay Area and one in Los Angeles) attended by up to five people per team; and
- At least one visit to an exemplar site – possibly out of state – with up to three team members.

All grantees are expected to participate in evaluating the impact of implementing team-based care in their health center. The Foundation and CCI will identify an external evaluator to develop a formative evaluation to help refine programmatic activities, and will work closely with grantees to collect and use their data for improvement. Grantees will be expected to:

- Provide quarterly data on key measures. Successful improvement efforts require teams to use data to inform practice and measure results. Clinics would report quarterly on a required set of appointment-access and team-effectiveness measures (for example, time to third-next available appointment, no-show rate, continuity of primary provider/care team, etc.). The evaluator will work with the teams to help interpret their data, and make any necessary adjustments to improve the program's impact on patient care.
- Participate in additional evaluation activities. Grantees will also provide limited baseline data and final data around provider/staff/patient experience and other measures to assess overall impact of the program. The evaluator may also conduct interviews with grantees to help share their stories and experiences.

For more information about what the Foundation does not fund, please visit:

<http://www.blueshieldcafoundation.org/grants/what-we-fund/eligibility-guidelines>

4. Eligibility

Community health centers, free clinics, and Indian/tribal clinics that receive Blue Shield of California Foundation core support funding are eligible to apply. County-operated clinics are also eligible to apply. Only one application per health center corporation or county system will be accepted.

Applicant must meet the Foundation's organizational requirements:

- Have a mission consistent with the mission and goals of the Foundation
- Be a nonprofit and tax-exempt organization under 501(c)(3) of the Internal Revenue Service Code (IRC) and defined as a public charity under 509(a) 1, 2, or 3 (types I, II, or a functionally integrated type III) or be a governmental, tribal, or public entity
- Have a reputation for credibility and integrity and primarily serve Californians
- For past and current Foundation grantees, meet current grant agreement requirements, and be up-to-date on all required reports from previous grants, as applicable

Applicants must also be able to meet the following requirements for participation in the program:

- For at least six months, the health center has empanelled patients and uses care teams ranging from provider-medical assistants dyads to larger teams
- The health center has implemented an electronic health record (EHR) system for at least six months prior to the grant submission deadline
- The health center must dedicate a data lead or data analyst to provide quarterly data extracts and other reports, as needed
- Willingness to adapt care team roles so tasks match appropriate level of expertise
- Willingness of leadership to implement changes across the organization proven within their organization to be effective to improve access to care
- Plan to scale the lessons and models to care teams across the organization
- Team must participate in program evaluation
- Team must actively participate in all technical assistance opportunities offered by CCI (meetings, webinars, site visits, etc.)
- Team must budget for travel to two in-person meetings (one in the San Francisco Bay Area and one in Los Angeles) and at least one site visit.

4. Grant Size and Term

Grant Size: Grant award amounts will vary based on the number of qualified applicants and the scope of the proposal and population being served. It is anticipated that the Foundation will award 10 to 15 grants. The maximum grant award will be \$75,000.

Grant Term: Proposed projects should be 12 months in duration. Shorter-term projects will not be considered.

Proposal Submission Timeline: Grant applications will be due **Friday, March 14, 2014 at 5:00pm (PST)**. There will be an optional Informational Webinar on **Thursday, February 13, 2014 at 11:30am (PST)**. If you choose to participate, registration is required.

5. Proposal Evaluation

The Foundation seeks to support safety net providers that already have care teams in place and have a strong commitment to improve the effectiveness of the teams to expand access to care. Strong applicants will successfully demonstrate:

- Clear buy-in from senior leadership and team participants, including one or more clinicians working in care teams;
- Strong support and interest in testing and adopting innovations to improve access to care for their patients by leveraging care team members;
- Staff capacity to participate in training and coaching; and
- Strong commitment to fully participate in the evaluation of the program, including ongoing measurement tracking and reporting to drive organizational change.

6. How to Apply

1. Apply through our online grant system using the following custom link:

http://www.cybergrants.com/BSCF/TBC_2014

Note: Applications must be submitted using the link above. DO NOT submit through the Foundation's website

2. Enter registered grantseeker email and password to login or register as a new grantseeker following the instructions at the top of the page.

Note: Only one grantseeker can be connected to each application.

3. On the Welcome page, scroll to the bottom of the page and click:

» **Start a New Application** «

4. After clicking the link, you will be directed to the application. There is a navigation bar at the top of each screen to allow for easy toggling between sections.

Notes:

- The name of this funding opportunity should appear above the navigation bar. If you do not see it, you are in the incorrect application. Exit the system and login through the link above.
 - Update organizational and contact information in the first two sections
 - Some fields in the application are pre-populated and cannot be edited
5. Click the "Submit" button on the preview application page to submit the application. You will receive an application receipt via email confirming your submission.

7. Contact Information

Content Questions: For questions related to eligibility for this grantmaking or to the content of the application, contact:

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Technical Questions: For questions related to the online grants system or application process, contact:

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Grants & Contracts Administrator
(415) 229-5468
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8. Key Dates

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| February 4, 2014 | RFA released |
| February 13, 2014 11:30am-12:30pm (PST) | Informational Webinar (optional – will be recorded) Register here (If you choose to participate, registration is required) |
| | Webinar recording and FAQ's will be posted on Blue Shield of California Foundation website no later than Friday, February 21, 2014 |
| March 14, 2014 5:00pm (PST) | All applications due |
| March 2014 – June 2014 | Proposals reviewed Due diligence and follow-up activities (as necessary) |
| June 2014 | Notification of grant decisions |
| July 2014 | Grant activities begin |