

HEALTH CARE INNOVATION AWARDS

The Health Care Innovation Awards are grants to applicants who will implement the most compelling new ideas to deliver better health, improved care and lower costs to people enrolled in Medicare, Medicaid and Children's Health Insurance Program (CHIP), particularly those with the highest health care needs.

The CMS Innovation Center announced the first batch of awardees for the Health Care Innovation Awards on May 8, 2012 and the second (final) batch on June 15, 2012. The following awards involve Medicaid beneficiaries. More information on each of the projects can be found at <http://innovation.cms.gov/initiatives/Innovation-Awards/index.html>.

Note:

- Projects shown may also be operating in other states (see the Geographic Reach)
- Descriptions and project data (e.g. gross savings estimates, population served, etc.) are 3 year estimates provided by each organization and are based on budget submissions required by the Health Care Innovation Awards application process.
- While all projects are expected to produce cost savings beyond the 3 year grant award, some may not achieve net cost savings until after the initial 3-year period due to start-up-costs, change in care patterns and intervention effect on health status.

ALABAMA

University of Alabama at Birmingham: Deep South Cancer Navigation Network (DSCNN)

Geographic Reach: Alabama, Florida, Georgia, Mississippi, Tennessee

Funding Amount: \$15,007,263

Estimated 3-Year Savings: \$49,815,239

Summary: The University of Alabama at Birmingham (UAB) and the UAB Comprehensive Cancer Center are receiving an award extending a regional network of lay health workers to expand comprehensive cancer care support services through a five state region. The intervention is designed to serve Medicare and Medicaid beneficiaries with complex or advanced disease and those with psycho-social barriers to appropriate care, many living in medically underserved inner city and rural communities.

ARKANSAS

University of Arkansas for Medical Sciences: Cost-effective Delivery of Enhanced Home Caregiver Training

Geographic Reach: Arkansas, California, Hawaii, Texas

Funding Amount: \$3,615,818

Estimated 3-Year Savings: \$1,286,251

Summary: The University of Arkansas for Medical Sciences is receiving an award for enhanced training of both family caregivers and the direct-care workforce in order to improve care for elderly patients requiring long-term care services, including Medicare beneficiaries qualifying for home healthcare services and Medicaid beneficiaries who receive homemaker and personal care assistant services.

CALIFORNIA

Asian Americans for Community Involvement: Patient Navigation Center

Geographic Reach: California

Funding Amount: \$2,684,545

Estimated 3-Year Savings: \$3,373,602

Summary: Asian Americans for Community Involvement (AACI), in partnership with the Career Ladders Project and three community colleges is receiving an award to train Asian and Hispanic youth and veteran AACI case workers as non-clinical health workers for a Patient Navigation Center. Serving low-income Asian and Hispanic families in Santa Clara County, the Center will provide enabling services, including translation, appointment scheduling, referrals, transportation, and application help for social services, as well as after-hours and self-care assistance.

California Long-Term Care Education Center: Care Team Integration of the Home-Based Workforce

Geographic Reach: California

Funding Amount: \$11,831,445

Estimated 3-Year Savings: \$24,957,836

Summary: The California Long-Term Care Education Center, partnering with SEIU United Long Term Care Workers (ULTCW), Shirley Ware Education Center (SEIU-UHW), L.A. Care Health Plan, Contra Costa County Department of Aging and Health Services, Health Plan of San Mateo and the UCSF Center for Health Professions, is receiving an award to integrate personal care attendants into the health care system. This intervention will serve beneficiaries of California's Medicaid personal care services program, the In-Home Support Services (IHSS). All beneficiaries are disabled and 85 percent are dually eligible for both Medicare and Medicaid.

Family Service Agency of San Francisco: Prevention and Recovery in Early Psychosis (PREP)

Geographic Reach: California

Funding Amount: \$4,703,817

Estimated 3-Year Savings: \$4,235,801

Summary: Family Service Agency of San Francisco is receiving an award to expand and test its model for Prevention and Recovery in Early Psychosis (PREP) for low-income, largely Latino counties in the San Francisco area.

LifeLong Medical Care: Complex Care Initiative to Achieve the Triple Aim

Geographic Reach: California

Funding Amount: \$1,109,231

Estimated 3-Year Savings: \$1.1 million

Summary: LifeLong Medical Care is receiving an award to further integrate care and encourage healthy behavior, among 3250 seniors and other adults with disabilities who are Medicaid and dual Medicare/Medicaid-eligible beneficiaries. The goal is to reduce avoidable emergency room and hospital visits.

Pacific Business Group on Health: Intensive Outpatient Care Program

Geographic Reach: California

Funding Amount: \$19,139,861

Estimated 3-Year Savings: \$25,280,570

Summary: The Pacific Business Group on Health is receiving an award to work with various provider groups and health plans in rural and urban counties throughout the States of Arizona and California to improve care coordination for 30,000 Medicare and dual-eligible Medicare-Medicaid beneficiaries at risk from multiple chronic conditions. The goal is fewer emergency room visits, a reduction in avoidable hospitalizations, better mitigation of disease, and reduced complications as a result of intensive care management.

Palliative Care Consultants of Santa Barbara: Physicians Quick Response Service

Geographic Reach: California

Funding Amount: \$4,254,615

Estimated 3-Year Savings: \$3,229,481

Summary: Palliative Care Consultants of Santa Barbara is receiving an award to provide health care services to the frail elderly in times of crisis. The intervention will create new options for frail elderly to access rapid assessment and treatment in their homes through a Rapid Response Team (RRT) dispatched to the homes of seniors who have fallen ill. The goal is to reduce emergency room visits and avoidable hospital admissions, increase patient satisfaction, and provide better, more immediate care through a system that is patient-centered and timely.

San Francisco Community College: Transitions Clinic Network/Linking High-Risk Medicaid Patients From Prison to Community Primary Care

Geographic Reach: Alabama, California, Connecticut, District of Columbia, Maryland,

Massachusetts, New York, Puerto Rico

Funding Amount: \$6,852,153

Estimated 3-Year Savings: \$8,115,855

Summary: The San Francisco Community College District (City College of San Francisco), in partnership with the University of California San Francisco and Yale University, is receiving an award to address the health care needs of high-risk/high-cost Medicaid and Medicaid-eligible patients released from prison, targeting eleven community health centers in six states, The District of Columbia, and Puerto Rico. The outcomes will include reduced reliance on emergency room care, fewer hospital admissions, and lower cost, with improved patient health and better access to appropriate care.

South County Community Health Center: Ravenswood Family Health Care Innovation Project

Geographic Reach: California

Funding Amount: \$7,302,463

Estimated 3-Year Savings: \$6.2 million

Summary: South County Community Health Center (Ravenswood Family Health Center) in partnership with Health Plan of San Mateo, San Mateo County Health System, and Nuestra Casa, is receiving an award to create a health disparities collaborative for over 19 thousand people with diabetes in a multi-cultural, high-risk, high-cost population in southeast San Mateo County, California.

Sutter Health: Advanced Illness Management (AIM)

Geographic Reach: California

Funding Amount: \$13,000,000

Estimated 3-Year Savings: \$29,388,894

Summary: Sutter Health is receiving an award to expand their Advanced Illness Management program (AIM) across the entire Sutter Health system in Northern California, serving patients who have severe chronic illness but are not ready for hospice care, are in clinical, functional, or nutritional decline, and are high-level consumers of health care.

Regents of the University of California, Los Angeles: UCLA Alzheimer's and Dementia Care

Geographic Reach: California

Funding Amount: \$3,208,540

Estimated 3-Year Savings: \$6.9 million

Summary: The Regents of the University of California, Los Angeles, are receiving an award to expand a new program to provide coordinated, comprehensive, patient and family-centered, and efficient care for approximately 1000 Medicare and Medicaid beneficiaries with Alzheimer's disease or other forms of dementia. The UCLA Health System operates in the western area of Los Angeles County.

University of Southern California: Integrating Clinical Pharmacy Services in Safety Net Clinics

Geographic Reach: California

Funding Amount: \$12,007,677

Estimated 3-Year Savings: \$43,716,000

Summary: The University of Southern California is receiving an award for a plan to integrate clinical pharmacy services into safety net clinics, providing medication therapy management, disease state management, medicine reconciliation, medication access services, patient counseling, drug information education, preventive care programs, provider education, and quality improvement review for care providers and for the underserved and vulnerable populations of Santa Ana, Huntington Beach, and Garden Grove. This will improve medication adherence, confirm the appropriateness and safety of medication use, and reduce avoidable hospitalizations and emergency room visits, while improving patient and population health.

COLORADO

Southeast Mental Health Services: Total Integration, Patient Navigation and Provider Training Project

Geographic Reach: Colorado

Funding Amount: \$1,405,924

Estimated 3-Year Savings: \$1,875,000

Summary: Southeast Mental Health Services is receiving an award to coordinate comprehensive, community-based care for high-risk, high-cost, and chronically ill residents of rural Prowers County, Colorado. The program will employ trained patient navigators to increase patients' access to primary and behavioral care, preventive care, and early intervention services, offering team-based education and coaching to improve both population health and self-management of disease. The results will include a reduction in emergency room visits and other high cost interventions, mitigation of the progress of chronic disease, better health habits, and better care and quality of life for these vulnerable patients

DELAWARE

Christiana Care Health System: Bridging the Divide

Geographic Reach: Delaware

Funding Amount: \$9,999,999

Estimated 3-Year Savings: \$376,327

Summary: Christiana Care Health System, serving the state of Delaware, is receiving an award to create and test a system that will use a heart disease "data hub" and case managers to improve care for post-myocardial infarction and revascularization patients, the majority of them Medicare or Medicaid beneficiaries.

Nemours Alfred I. DuPont Hospital for Children: Optimizing Health Outcomes for Children with Asthma in Delaware

Geographic Reach: Delaware

Funding Amount: \$3,697,300

Estimated 3-Year Savings: \$4,743,184

Summary: Nemours/ Alfred I. duPont Hospital for Children, partnering with Delaware Health and Social Services, Division of Medicaid and Medical Assistance, and Division of Public Health, the South Wilmington Planning Network, Healthy Kids Collaboration in Kent County, Sussex County Health Promotion Coalition, United Way of Delaware, and University of Delaware is receiving an award to enhance family-centered health homes by adding services for children with asthma and developing a population health initiative in the neighborhoods surrounding targeted primary care practices. The intervention will also increase coordination of services by integrating care with community support services and local government initiatives to provide healthier environments for children with asthma in schools, child care centers, and housing, and by deploying community health workers to serve as patient navigators and provide case management services to families with high needs.

DISTRICT OF COLUMBIA

George Washington University: Using Telemedicine in Peritoneal Dialysis to Improve Patient Adherence and Outcomes While Reducing Overall Costs

Geographic Reach: District of Columbia, Maryland, Pennsylvania, Virginia

Funding Amount: \$1,939,127

Estimated 3-Year Savings: \$1.7 million

Summary: George Washington University is receiving an award to improve care for about 300 patients on peritoneal dialysis in Washington, D.C., and eventually in Philadelphia and Southern Maryland. The intervention will use telemedicine to offer real-time, continuous, and interactive health monitoring to improve patient safety and treatment.

Mary's Center for Maternal Child Care: Capital Clinical Integrated Network (CCIN)

Geographic Reach: District of Columbia

Funding Amount: \$14,991,005

Estimated 3-Year Savings: \$17,712,000

Summary: Mary's Center for Maternal Child Care in Washington, D.C. is receiving an award to implement and test an integrated clinical network to improve care for chronically ill people in the D.C. area who rely on emergency room (ER) visits for health care. The project will use a city-wide database, care teams, and tele-health to communicate with these patients, develop care plans for them, and personally manage their care as they are gradually transitioned into patient-centered medical homes.

FLORIDA

University of Miami: Expanded Activities of School Health Initiative

Geographic Reach: Florida

Funding Amount: \$4,097,198

Estimated 3-Year Savings: \$5,620,017

Summary: The University of Miami, in partnership with Medicaid health plans, the University of Florida College of Dentistry, the Miami Dade Area Education Center, the Center for Haitian Studies, the Larkin Residency program, and Overtown Youth Center, is receiving an award to improve care and access to care for children in four communities in the Miami-Dade County area who have health problems that include asthma, obesity, type II diabetes, and STDs. This intervention will expand the services and utility of school-based health clinics, increase collaboration with other care providers, services, and school-health stakeholders, and enhance use and sharing of health information technology.

GEORGIA

Emory University Center for Critical Care: Rapid Development and Deployment of Non-Physician Providers in Critical Care

Geographic Reach: Georgia

Funding Amount: \$10,748,332

Estimated 3-Year Savings: \$18.4 million

Summary: Emory University, in partnership with Philips Company (a Tele-Intensive Care Unit contractor) and several medical centers including Saint Joseph's Health System, Northeast Georgia Medical Center, and Southern Regional Medical Center, is receiving an award to hire more than 40 critical care professionals, including 20 nurse practitioners (NP) and physician assistants (PA) who will be deployed to underserved and rural hospitals in Northern Georgia. This innovative strategy will serve over ten thousand Medicare and Medicaid beneficiaries and aim to mitigate problems associated with the lack of critical care doctors in the region.

HAWAII

FirstVitals Health and Wellness, Inc: Improving the Health and Care of Low-Income Diabetics at Reduced Costs

Geographic Reach: Hawaii

Funding Amount: \$3,999,713

Estimated 3-Year Savings: \$4,829,955

Summary: FirstVitals Health and Wellness Inc., in partnership with AlohaCare, is receiving an award to implement and test a care coordination and health information technology plan that will better regulate glucose levels for Medicaid-eligible patients with Type 1 and Type 2 diabetes.

St. Francis Healthcare Foundation of Hawaii: Preventing Hospitalizations in Very High-Risk Patients

Geographic Reach: Hawaii

Funding Amount: \$5,299,706

Estimated 3-Year Savings: \$10,393,944

Summary: St. Francis Healthcare Foundation of Hawaii is receiving an award for telehealth-based home monitoring for very high risk patients with complex health care needs to prevent hospitalizations.

University of Hawaii at Hilo: Pharm2Pharm, A Formal Hospital Pharmacist to Community Pharmacist Collaboration

Geographic Reach: Hawaii

Funding Amount: \$14,346,043

Estimated 3-Year Savings: \$27,114,939

Summary: The University of Hawaii at Hilo and its College of Pharmacy, in partnership with Hawaii Health Systems Corporation and Hawaii Pacific Health, community pharmacies in rural counties of Hawaii, the Hawaii Health Information Exchange, and Hawaii Health Information Corporation, is receiving an award to improve medication reconciliation and management for the elderly in three rural counties of Hawaii.

IDAHO

St. Luke's Regional Medical Center, Ltd: Tele-Critical Care and Emergency Services

Geographic Reach: Idaho, Nevada, Oregon

Funding Amount: \$11,762,777

Estimated 3-Year Savings: \$12,567,875

Summary: St. Luke's Regional Medical Center is receiving an award for remote intensive care unit (ICU) monitoring and care management in rural southwestern and central Idaho and eastern Oregon.

ILLINOIS

University of Chicago: CommunityRx System/Linking Patients and Community-Based Service

Geographic Reach: Illinois

Funding Amount: \$5,862,027

Estimated 3-Year Savings: \$6.4 million

Summary: The University of Chicago Urban Health Initiative in partnership with Chicago Health Information Technology Regional Extension Center (CHITREC) and the Alliance of Chicago Community Health Services is receiving an award to develop the CommunityRx system, a continuously updated electronic database of community health resources that will be linked to the Electronic Health Records of local safety net providers. In real time, the system will process patient data and print out a "Health.eRx" for the patient, including referrals to community resources relevant to the patient's condition and status.

IOWA

University of Iowa: Transitional Care Teams to Improve Quality and Reduce Costs for Rural Patients with Complex Illness

Geographic Reach: Iowa

Funding Amount: \$7,662,278

Estimated 3-Year Savings: \$12,500,000

Summary: The University of Iowa, in partnership with the 11 hospitals comprising its Critical Access Hospital Network, is receiving an award to improve care coordination and communication with practitioners in ten rural Iowa counties. The program will serve Medicare, Medicaid, and Medicare/Medicaid dual-eligible beneficiaries and privately insured and uninsured patients who have complex illness, including psychiatric disorders, heart disease, kidney disease, cancer, endocrine and gastrointestinal disorders, and geriatric issues.

LOUISIANA

Ochsner Clinic Foundation: Comprehensive Stroke Care Model Through the Continuum of Care

Geographic Reach: Louisiana

Funding Amount: \$3,867,944

Estimated 3-Year Savings: \$4.9 million

Summary: Ochsner Clinic Foundation is receiving an award to better serve almost 1000 acute care stroke patients in Jefferson and St. Tammany parishes in Louisiana. The model will employ a stroke management and quality assurance through a telemedicine system called "Stroke Central." This system will enable care providers to monitor patients, evaluate outcomes, and check on medication and treatment adherence on a real time basis.

MARYLAND

**Johns Hopkins School of Nursing: CAPABLE for Frail Dually Eligible Older Adults/
Achieving the Triple Aim by Improving Functional Ability at Home**

Geographic Reach: Maryland

Funding Amount: \$4,093,356

Estimated 3-Year Savings: \$6,800,000

Summary: The Johns Hopkins School of Nursing is receiving an award for a Medicare/Medicaid dual eligibles program (Community Aging in Place, Advancing Better Living for Elders – “CAPABLE”) that uses a care management team to improve the everyday functioning of complex, frail patients in their own homes.

Johns Hopkins University: Johns Hopkins Community Health Partnership (J-CHiP)

Geographic Reach: Maryland

Funding Amount: \$19,920,338

Estimated 3-Year Savings: \$52,600,000

Summary: Johns Hopkins University -- in partnership with Johns Hopkins Health System and its hospitals, community clinics and other affiliates; the Johns Hopkins Urban Health Institute; Priority Partners MCO; Baltimore Medical System, a Federally Qualified Health Center; and local skilled nursing facilities, is receiving an award to create a comprehensive and integrated program, the Johns Hopkins Community Health Partnership (J-CHiP). J-CHiP is designed to increase access to services for high-risk adults in East Baltimore, MD, especially those with chronic illness, mental illness, and/or substance abuse conditions.

MASSACHUSETTS

Health Resources in Action: New England Asthma Innovations Collaborative

Geographic Reach: Connecticut, Massachusetts, Rhode Island, Vermont

Funding Amount: \$4,040,657

Estimated 3-Year Savings: \$4.1 million

Summary: Health Resources in Action is receiving an award for a program of its New England Asthma Regional Council, titled the New England Asthma Innovations Collaborative (NEAIC). NEAIC is a multi-state, multi-sector partnership that includes health care providers, payers, and policy makers aimed at creating an innovative Asthma Marketplace in New England that will increase the supply and demand for high-quality, cost-effective health care services.

Vinfen Corporation: Community-Based Health Homes for Individuals with Serious Mental Illness

Geographic Reach: Massachusetts

Funding Amount: \$2,942,962

Estimated 3-Year Savings: \$3,792,020

Summary: The Vinfen Corporation, in partnership with Bay Cove Human Services, North Suffolk Mental Health, Brookline Mental Health, and Commonwealth Care Alliance (a non-profit managed care organization), is receiving an award to integrate health care and behavioral health care for individuals with serious mental illness in metropolitan Boston.

MICHIGAN

Michigan Public Health Institute: Michigan Pathways to Better Health

Geographic Reach: Michigan

Funding Amount: \$14,145,784

Estimated 3-Year Savings: \$17,498,641

Summary: The Michigan Public Health Institute, partnering with the Michigan Department of Community Health and the Community Health Access Project, is receiving an award to integrate community health workers (CHWs) into primary care teams in the county of Ingham and cities of Saginaw and Muskegon. These CHWs will coach patients on self-management of conditions and encourage regular primary care visits. In addition, the program will connect at-risk populations with local care and support services that address social determinants of health that impede achievement of positive health outcomes.

MINNESOTA

Courage Center: Maximum Health at Minimal Cost: A Community-Based Medical Home Model for the Non-Elderly Disabled”

Geographic Reach: Minnesota

Funding Amount: \$1,767,667

Estimated 3-Year Savings: \$2 million

Summary: Courage Center is receiving an award to test a community-based medical home model to serve 300 adults with disabilities and complex health conditions, particularly complex neurological conditions, in Minneapolis - St. Paul metropolitan area. The intervention will coordinate and improve access to primary and specialty care, increase adherence to care, and empower participants to better manage their own health.

Institute for Clinical Systems Improvement: Care Management of Mental and Physical Co-Morbidities/A Triple Aim Bullseye

Geographic Reach: California, Colorado, Iowa, Massachusetts, Michigan, Minnesota, Pennsylvania, Washington, Wisconsin

Funding Amount: \$17,999,635

Estimated 3-Year Savings: \$27,693,046

Summary: The Institute for Clinical Systems Improvement (ICSI) of Bloomington, Minnesota is receiving an award to improve care delivery and outcomes for high-risk adult patients with Medicare or Medicaid coverage who have depression plus diabetes or cardiovascular disease. The program will use care managers and health care teams to assess condition severity, monitor care through a computerized registry, provide relapse and exacerbation prevention, intensify or change treatment as warranted, and transition beneficiaries to self-management.

Mayo Clinic: Patient-Centric Electronic Environment for Improving Acute Care Performance

Geographic Reach: Massachusetts, Minnesota, New York, Oklahoma

Funding Amount: \$16,035,264

Estimated 3-Year Savings: \$81,345,987

Summary: The Mayo Clinic, in collaboration with US Critical Illness and Injury Trials Group and Philips Research North America, is receiving an award to improve critical care performance for Medicare/Medicaid beneficiaries in intensive care units (ICUs).

MONTANA

HealthLinkNow, Inc: Patient-Centered Medical Home for Mental Health Services in Wyoming and Montana

Geographic Reach: Montana, Wyoming

Funding Amount: \$7,718,636

Estimated 3-Year Savings: \$8,100,000

Summary: HealthLinkNow Inc, partnering with a number of local provider groups and health networks in Montana and Wyoming, is receiving an award to provide a Patient Centered Medical Home Program (PCMH) with mental health and substance abuse services in areas where geography and lack of psychiatrists and psychologists complicate access.

Mineral Regional Health Center: Frontier Medicine Better Health Partnership

Geographic Reach: Montana

Funding Amount: \$10,499,889

Estimated 3-Year Savings: \$31,922,800

Summary: Mineral Regional Health Center, partnering with Montana's frontier and rural health care communities, Mayo Clinic's Health System's Practice-Based Research Network (PBRN), Appalachian Osteopathic Postgraduate Training Institute Consortium (A-OPTIC), and iVantage Health Analytics, is receiving an award to develop and implement a Frontier and Rural Performance Network and learning collaborative that will standardize operations and efficiencies across all of the state's hospitals, including tertiary care centers, critical access hospitals, and rural health clinics in the state.

NEVADA

Nevada Regional Emergency Medical Services: REMSA Community Health Early Intervention Team (CHIT)

Geographic Reach: Nevada

Funding Amount: \$9,872,988

Estimated 3-Year Savings: \$10,500,000

Summary: The Regional Emergency Medical Services Authority of Reno, Nevada, a non-profit provider of ground and air ambulance services, in partnership with Renown Medical Group, the University of Nevada-Reno School of Community Health Sciences, the Washoe County Health District, and the State of Nevada Office of Emergency Medical Services, is receiving an award to create a Community Health Early Intervention Team (CHIT) to respond to lower acuity and chronic disease situations in urban, suburban, and rural areas of Washoe County Nevada. CHIT is designed to reduce unnecessary ambulance responses, as well as hospital admissions and readmissions, while improving the patients' health care.

NEW HAMPSHIRE

Trustees of Dartmouth College: Engaging Patients Through Shared Decision Making/Using Patient and Family Activators to Meet the Triple Aim

Geographic Reach: California, Colorado, Idaho, Iowa, Maine, Massachusetts, Michigan, Minnesota, New Hampshire, New Jersey, New York, Oregon, Texas, Utah, Vermont, Washington

Funding Amount: \$26,172,439

Estimated 3-Year Savings: \$63,798,577

Summary: The Trustees of Dartmouth College is receiving an award to collaborate with 15 large health care systems around the country to hire Patient and Family Activators (PFAs). The PFAs will be trained to engage in shared decision making with patients and their families, focusing on preferences and supplying sensitive care choices.

NEW JERSEY

Cooper University Hospital

Geographic Reach: New Jersey

Funding Amount: \$2,788,457

Estimated 3-Year Savings: \$6.2 million

Summary: Cooper University Hospital, serving Camden, New Jersey, and adjoining areas, is receiving an award to better serve over 1,200 patients with complex medical needs who have relied on emergency rooms and hospital admissions for care. The intervention will use care management and care transition teams to work with these people to reduce avoidable emergency room visits, inpatient hospital admissions, and hospital readmissions and improve their access to primary health care.

Developmental Disabilities Health Services: Expanding and Testing a Nurse Practitioner-Led Health Home Model for Individuals with Developmental Disabilities

Geographic Reach: Arkansas, New Jersey, New York

Funding Amount: \$3,701,528

Estimated 3-Year Savings: \$5,374,080

Summary: Developmental Disabilities Health Services is receiving an award to test a developmental disabilities health home model, using care management/primary care teams of nurse practitioners and MDs to improve the health and care of persons with developmental disabilities in important clinical areas. The health homes will serve individuals with intellectual and developmental disabilities who receive Medicaid and/or Medicare benefits in New Jersey, the Bronx, and Little Rock, Arkansas, and are eligible for services in each state's Home and Community-Based Services waiver program, as well as individuals who are commercially insured and uninsured. All of these patients are considered high-risk and many have co-morbidities.

Rutgers, The State University of New Jersey Center for State Health Policy: Sustainable High-Utilization Team Model

Geographic Reach: California, Colorado, Missouri, Pennsylvania

Funding Amount: \$14,347,808

Estimated 3-Year Savings: \$67,719,052

Summary: Rutgers, The State University of New Jersey, is receiving an award to expand and test a team-based care management strategy for high-cost, high-need, low-income populations served by safety-net provider organizations in Allentown, PA, Aurora, CO, Kansas City, MO, and San Diego, CA. Led by Rutgers' Center for State Health Policy, the project will use care management teams (including nurses, social workers, and community health workers) to provide clients with patient-centered support that addresses both health care needs and the underlying determinants of health.

NEW MEXICO

Ben Archer Health Center: A Home Visitation Program for Rural Populations in Northern Dona Ana County, New Mexico

Geographic Reach: New Mexico

Funding Amount: \$1,270,845

Estimated 3-Year Savings: \$6,325,888

Summary: The Ben Archer Health Center in southern New Mexico is receiving an award to implement an innovative home visitation program for individuals diagnosed with chronic disease, persons at risk of developing diabetes, vulnerable seniors, and homebound individuals, as well as young children and hard to reach county residents. Ben Archer provides primary health and dental care to rural Dona Ana County, a medically underserved area and health professional shortage area.

Innovative Oncology Business Solutions, Inc: Community Oncology Medical Homes (COME HOME)

Geographic Reach: Florida, Georgia, Maine, New Mexico, Ohio, Pennsylvania, Tennessee
Funding Amount: \$19,757,338

Estimated 3-Year Savings: \$33,514,877

Summary: Innovative Oncology Business Solutions, Inc., representing 7 community oncology practices across the United States is receiving an award to implement and test a medical home model of care delivery for newly diagnosed or relapsed Medicare and Medicaid beneficiaries and commercially insured patients with breast, lung, or colorectal cancer.

University of New Mexico Health Sciences Center: Leverage Innovative Care Delivery and Coordination Model/Project ECHO

Geographic Reach: New Mexico, Washington

Funding Amount: \$8,473,809

Estimated 3-Year Savings: \$11.1 million

Summary: The University of New Mexico Health Sciences Center is receiving an award for its ECHO Project, which will serve areas of New Mexico and Washington. The program is based on eight years of success in New Mexico and two years in Washington State. The intervention will identify 5000 high cost, high-utilization, high-severity patients and uses a team of "primary care intensivists," specifically trained in care for complex patients with multiple chronic diseases, working in concert with area managed care organizations and care providers.

NEW YORK

Bronx Regional Health Information Organization: The Bronx Regional Informatics Center (BRIC)

Geographic Reach: New York

Funding Amount: \$12,839,157

Estimated 3-Year Savings: \$15,419,460

Summary: The Bronx Regional Health Information Organization (Bronx RHIO), in partnership with its member organizations and Bronx Community College, Weill Cornell Medical College, and the Emergency Health Information Technology group at Montefiore Medical Center, is receiving an award to create the Bronx Regional Informatics Center, which will develop data registries and predictive systems that will proactively encourage early care interventions and enable providers to better manage care for high-risk, high-cost patients.

Feinstein Institute for Medical Research: Using Care Managers and Technology to Improve the Care of Patients with Schizophrenia

Geographic Reach: Colorado, Florida, Michigan, Minnesota, Missouri, New Hampshire, New Mexico, New York, Oregon

Funding Amount: \$9,380,855

Estimated 3-Year Savings: \$10,080,000

Summary: The Feinstein Institute for Medical Research is receiving an award to develop a workforce that is capable of delivering effective treatments, using newly available technologies, to at-risk, high-cost patients with schizophrenia.

Fund for Public Health in New York: Parachute NYC/An Alternative Approach to Mental Health Treatment and Crisis Services

Geographic Reach: New York

Funding Amount: \$17,608,085

Estimated 3-Year Savings: \$51,696,138

Summary: The Fund for Public Health in New York, Inc., in partnership with the New York City Department of Health and Mental Hygiene's Division of Mental Hygiene, is receiving an award to implement Parachute NYC, providing need-adapted treatment model (NATM) interventions for Medicaid beneficiaries and other people with serious mental illness who have a diagnosis of psychosis.

Mount Sinai School of Medicine: Geriatric Emergency Department Innovations in Care through Workforce, Informatics, and Structural Enhancements (GEDI WISE)

Geographic Reach: Illinois, New Jersey, New York

Funding Amount: \$12,728,753

Estimated 3-Year Savings: \$40,124,805

Summary: Mount Sinai School of Medicine is receiving an award to integrate geriatric care with emergency department (ED) care in three large, urban acute care hospitals in New York, New Jersey, and Illinois.

University Emergency Medical Services: Better Health through Social and Health Care Linkages Beyond the Emergency Department

Geographic Reach: New York

Funding Amount: \$2,570,749

Estimated 3-Year Savings: \$6.1 million

Summary: University Emergency Medical Services, a practice plan affiliated with the Department of Emergency Medicine at the University at Buffalo is receiving an award to deploy community health workers in emergency departments (EDs) to identify high-risk patients and link them to primary care, social and health services, education, and health coaching. The program targets 2,300 Medicare and Medicaid beneficiaries who have had two or more emergency department visits over 12 months at two ERs in urban Buffalo, New York.

NORTH CAROLINA

Duke University: From Clinic to community/Achieving Health Equity in the Southern United States

Geographic Reach: Mississippi, North Carolina, West Virginia

Funding Amount: \$9,773,499

Estimated 3-Year Savings: \$20.8 million

Summary: Duke University, in conjunction with the University of Michigan National Center for Geospatial Medicine, Durham County Health Department (Durham County, NC), Cabarrus Health Alliance (Cabarrus County, NC), Mississippi Public Health Institute (Quitman County, MS), Marshall University, and Mingo County Diabetes Coalition (Mingo County, WV) is receiving an award for its plan to reduce death and disability from Type 2 diabetes mellitus among fifty-seven thousand people in four Southeastern counties who are underserved and at-risk populations in the Southeast.

Mountain Area Health Education Center: Regional Integrated Multi-Disciplinary Approach to Prevent and Treat Chronic Pain in North Carolina

Geographic Reach: North Carolina

Funding Amount: \$1,186,045

Estimated 3-Year Savings: \$2.4 million

Summary: The Mountain Area Health Education Center, serving 16 counties in Western North Carolina, is receiving an award to test team-based enhanced primary care for patients with chronic pain, whose treatment can be both costly and avoidably frequent. The target population for the test includes over 2,000 patients. The intervention will create multidisciplinary teams to

provide enhanced primary care, using mid-level providers to co-manage care and providing counseling and medication management services.

North Carolina Community Networks: Building a Statewide Child Health Accountable Care Collaborative/The North Carolina Strategy for Improving Health, Improving Quality, Reducing Costs, and Enhancing the Workforce

Geographic Reach: North Carolina

Funding Amount: \$9,343,670

Estimated 3-Year Savings: \$24,089,682

Summary: North Carolina Community Care Networks, Inc., in partnership with the academic medical centers at Carolinas Medical Center-Charlotte, Duke University Health System, University of North Carolina Hospitals, Vidant Medical Center-East Carolina, and Wake Forest Baptist Health, as well as the children's units at Cape Fear Valley Health, Cone Health, Mission Hospital, New Hanover Regional Medical Center, Presbyterian Healthcare, and WakeMed Hospitals, is receiving an award to form a Child Health Accountable Care Collaborative. This Collaborative will provide care coordination through embedded specialty care managers in the offices of specialists and through "parent navigators" who will work with patients in their homes. The program addresses the shortage of both pediatric primary care physicians and subspecialists, and will serve 50,000 Medicaid and CHIP children with chronic disease for whom care is costly and fragmented.

NORTH DAKOTA

Northland Healthcare Alliance: Improving Health for the Elderly in North Dakota One Community at a Time

Geographic Reach: North Dakota

Funding Amount: \$2,726,216

Estimated 3-Year Savings: \$2,966,280

Summary: Northland Healthcare Alliance is receiving an award to implement a modified version of the PACE model in rural North Dakota. The Alliance will hire and train care coordinators in seven rural communities, connecting interdisciplinary teams via teleconferences and telemedicine. It will use existing long-term care or assisted living programs and sites to provide coordinated services to the frail elderly, increasing services and expanding options for the elderly to remain in safe environments in the community.

OHIO

The Research Institute at Nationwide Children's Hospital: Partners for Kids Expansion

Geographic Reach: Ohio

Funding Amount: \$13,160,092

Estimated 3-Year Savings: \$51,714,650

Summary: The Research Institute at Nationwide Children's Hospital, in partnership with Akron Children's Hospital and its integrated physician group, is receiving an award to expand its Partners for Kids (PFK) program in Ohio, serving over 492,000 Medicaid children enrollees and 25,000 children with disabilities (the most costly pediatric population). PFK will enhance provider incentives and improve access for high risk rural and urban underserved populations through comprehensive medical home-based services and the rapid deployment of an expanded health care workforce focusing on behavioral health, complex care, and high risk pregnancy.

University Hospitals of Cleveland: Transforming Pediatric Ambulatory Care/The Physician Extension Team

Organizations: University Hospitals (UH) Rainbow Babies and Children's Hospital at UH Case Medical Center partnering with Ohio Medicaid, CareSource, WellCare, 4 community mental health agencies, Cuyahoga Community College, Cleveland Schools, Head Start, InstantCare, and HealthSpot.

Geographic Reach: Ohio

Funding Amount: \$12,774,935

Estimated 3-Year Savings: \$13.5 million

Summary: University Hospitals (UH) Rainbow Babies and Children's Hospital at UH Case Medical Center is receiving an award to improve care for approximately 65,000 children with Medicaid with high rates of emergency room (ER) visits, complex chronic conditions, and significant behavioral health problems in several counties across northeastern Ohio.

OREGON

Providence Portland Medical Center: Redesigning Service Delivery through the Tri-County Health Commons

Geographic Reach: Oregon

Funding Amount: \$17,337,093

Estimated 3-Year Savings: \$32,542,913

Summary: The Providence Portland Medical Center, in partnership with CareOregon, Providence Health & Services, Kaiser Permanente, Legacy Health, Oregon Health and Science University, the Coalition of Community Health Centers, Multnomah County, Clackamas County, and Washington County, is receiving an award to develop a Medicaid Coordinated Care Organization (CCO). This CCO will integrate care delivery for Medicaid and Medicare/Medicaid dual-eligible beneficiaries through an unprecedented level of cooperation among traditional competitors.

PENNSYLVANIA

Finity Communications, Inc: EveryBODY Get Healthy

Geographic Reach: Pennsylvania

Funding Amount: \$4,967,962

Estimated 3-Year Savings: \$8.7 million

Summary: Finity Communications, Inc., is receiving an award to improve health care for high need populations in the greater Philadelphia area. The intervention will use health information technology to track and monitor over 120,000 at-risk patients, create a participant engagement program, develop integrated health profiles and care management plans, and evaluate and reassess treatment on a continuing basis.

The Trustees of the University of Pennsylvania: A Rapid Cycle Approach to Improving Medication Adherence through Incentives and Remote Monitoring for Coronary Artery Disease Patients

Geographic Reach: New Jersey, Pennsylvania

Funding Amount: \$4,841,221

Estimated 3-Year Savings: \$2,787,030

Summary: The University of Pennsylvania is receiving an award for a program to improve medication adherence and health outcomes in post-discharge patients who are recovering from acute myocardial infarctions in metropolitan Philadelphia and adjoining areas of New Jersey. Such patients typically have high rates of poor medication adherence and hospital readmissions

and are costly to monitor through intensive case management. The intervention will increase medication adherence through telemonitoring and a visual and audible “reminder” system.

The Trustees of the University of Pennsylvania: Comprehensive Longitudinal Advanced Illness Management (CLAIM)

Geographic Reach: Pennsylvania

Funding Amount: \$4,361,539

Estimated 3-Year Savings: \$9,427,468

Summary: The Trustees of the University of Pennsylvania are receiving an award to test a comprehensive set of home care services for Medicare and/or Medicaid beneficiaries with advanced cancer who are receiving skilled home care and have substantial palliative care needs, but are not yet eligible for hospice care. The program will serve five counties in the metropolitan Philadelphia area.

RHODE ISLAND

University of Rhode Island: Living Rite-A Disruptive Solution for Management of Chronic Care Disease

Geographic Reach: Rhode Island

Funding Amount: \$13,955,411

Estimated 3-Year Savings: \$15,526,726

Summary: The University of Rhode Island is receiving an award for a plan to use interdisciplinary care management teams, including community health workers, combined with using the Multiple Health Behavior Change technique to teach patients how to best manage their chronic diseases, to provide comprehensive and preventive care for intellectually and developmentally challenged dual eligible beneficiaries of Medicare and Medicaid 20 and older who are citizens of Rhode Island. By integrating the efforts of a large group of state agencies, major health systems, educational institutions, disability organizations, and service providers, the program will deliver seamless and comprehensive care in an efficient manner, improving health care and lower cost for dual eligible beneficiaries of Medicare and Medicaid.

Women and Infants Hospital of Rhode Island: Partnering with Parents, the Medical Home and Community Provider to Improve Transition Services for High-Risk Preterm Infants in Rhode Island

Geographic Reach: Rhode Island

Funding Amount: \$3,261,494

Estimated 3-Year Savings: \$3.7 million

Summary: The Women and Infants Hospital of Rhode Island is receiving an award to improve services for approximately 2400 mothers in Rhode Island who have pre-term babies. The intervention will hire, train and deploy family care teams to offer education and support and monitor infants' growth and development. It will also support primary care providers who help provide care for this at-risk population. The result is expected to be reduced emergency room visits, fewer hospital readmissions, and decreased neonatal morbidity.

SOUTH DAKOTA

Delta Dental Plan of South Dakota: Improving the Care and Oral Health of American Indian Mothers and Young children and American Indian People with Diabetes on South Dakota Reservations

Geographic Reach: South Dakota

Funding Amount: \$3,364,528

Estimated 3-Year Savings: \$6.2 million

Summary: Delta Dental Plan, which covers over thirty-thousand isolated, low-income, and underserved Medicaid beneficiaries and other American Indians on reservations throughout South Dakota, is receiving an award to improve oral health and health care for American Indian mothers, their young children, and American Indian people with diabetes. Providing preventive care will help avoid and arrest oral and dental diseases, repair damage, prevent recurrence, and ultimately, reduce the need for surgical care.

Sanford Health: Sanford One Care/Transforming Primary Care for the 21st Century

Geographic Reach: Iowa, Minnesota, North Dakota, South Dakota

Funding Amount: \$12,142,606

Estimated 3-Year Savings: \$14,135,429

Summary: Sanford Health is receiving an award to transform health care delivery through the full integration of primary and behavioral health care in South Dakota, North Dakota and Minnesota clinics. Sanford's enhanced fully integrated medical home model features patient-centered collaborative teams of primary and behavioral health professionals. The Medicare, Medicaid and CHIP beneficiaries along with the Native American and multicultural populations will benefit significantly from this award. This model of workforce development and rapid process redesign, along with the integration of behavioral health and primary care, will improve clinical outcomes and drive efficient utilization of resources.

TENNESSEE

The National Health Care for the Homeless Council: Community Health Workers and HCH/A Partnership to Promote Primary Care

Geographic Reach: California, Florida, Illinois, Massachusetts, Nebraska, New Hampshire, North Carolina, Texas

Funding Amount: \$2,681,877

Estimated 3-Year Savings: \$1.5 million

Summary: The National Health Care for the Homeless Council is joining into a cooperative agreement to serve ten communities across various regions in the U.S. to reduce the number of emergency department visits and lack of primary care services for over 1700 homeless individuals. The intervention will integrate community health workers into Federally Qualified Health Centers to conduct outreach and case coordination for transitioning this population from the emergency department to a health center

University of Tennessee Health Science Center: Project SAFEMED

Geographic Reach: Tennessee

Funding Amount: \$2,977,865

Estimated 3-Year Savings: \$3,160,844

Summary: The University of Tennessee Health Science Center, in partnership with Methodist LeBonheur Healthcare's Methodist North Hospital and Methodist South Hospital, QSource, United Healthcare, BlueCross BlueShield and its BlueCare Medicaid plan, Southwest Tennessee Community College, the Tennessee Pharmacists Association, and the Bluff City, Bin Sina, and Memphis Medical Societies, is receiving an award to improve medication adherence and effective medication usage among high-risk patients in the northwest and southwest sections of Memphis, TN. The program will serve vulnerable adults (20-64) and seniors 65+ insured by Medicaid and/or Medicare who have multiple chronic diseases, including hypertension, diabetes, coronary artery disease, congestive heart failure, and chronic lung disease, as well as polypharmacy and high-inpatient utilization.

TEXAS

Center for Health Care Services: A Recovery-Oriented Approach to Integrated Behavioral and Physical Health Care for a High-Risk Population

Geographic Reach: Texas

Funding Amount: \$4,557,969

Estimated 3-Year Savings: \$5 million

Summary: The Center for Health Care Services in San Antonio, Texas, is receiving an award to integrate behavioral care and health care for a group approximately 260 homeless adults in San Antonio with severe mental illness or co-occurring mental illness and substance abuse disorders, at risk for chronic physical diseases. Their intervention will integrate health care into behavioral health clinics, using a multi-disciplinary care team to coordinate behavioral, primary, and tertiary health care for these people—most of them Medicaid beneficiaries or eligible for Medicaid—and is expected to improve their capacity to self-manage, reducing emergency room admissions, hospital admissions, and lowering cost, while improving health and quality of life and with estimated savings of \$5 million over 3 years.

The Methodist Hospital Research Institute: Sepsis Early Recognition and Response Initiative (SERRI)

Geographic Reach: Texas

Funding Amount: \$14,365,591

Estimated 3-Year Savings: \$48,226,102

Summary: The Methodist Hospital, in partnership with the Texas Gulf Coast Sepsis Network, is receiving an award to identify and treat sepsis before it progresses. Their program targets adult inpatients, including but not limited to Medicare and Medicaid beneficiaries, in acute care hospitals, long term acute care hospitals and skilled nursing facilities in Houston, Bryan, and McAllen, Texas.

University of North Texas Health Science Center: Brookdale Senior Living (BSL) Transitions of Care Program

Geographic Reach: Alabama, Arizona, California, Colorado, Connecticut, Delaware, Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nevada, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Virginia, Washington, Wisconsin

Funding Amount: \$7,329,714

Estimated 3-Year Savings: \$9,729,702

Summary: The University of North Texas Health Science Center (UNTHSC), in partnership with Brookdale Senior Living (BSL), is receiving an award to expand and test the BSL Transitions of Care Program which is based on an evidenced-based assessment tool called Interventions to Reduce Acute Care Transfers (INTERACT) for residents living in independent living, assisted living and dementia specific facilities in Texas and Florida.

The University of Texas Health Science Center at Houston: Comprehensive Care Provided in an Enhanced Medical Home to Improve Outcomes and Reduce Costs for High-Risk Chronically Ill Children

Geographic Reach: Texas

Funding Amount: \$3,701,370

Estimated 3-Year Savings: \$4,272,968

Summary: The University of Texas Health Science Center at Houston is receiving an award to improve care for children under 18 in the wider Houston area with chronic illnesses, including

congenital anomalies, pulmonary problems, gastro-intestinal problems, neurologic problems, cerebral palsy, mental retardation, and a 50% or more estimated risk of hospitalization per year. The program will provide comprehensive care through a special high-risk children's medical home where both primary and specialty services are provided in the same clinic during the same visit.

UTAH

Intermountain Health Care: Disruptive Innovation @ Intermountain Healthcare

Geographic Reach: Idaho, Utah

Funding Amount: \$9,724,142

Estimated 3-Year Savings: \$67,120,215

Summary: Intermountain Health Care Health Services, with 23 hospitals and 185 clinics in Utah and Southern Idaho, is receiving an award to test a new care delivery and payment model using an information technology-based simulation of human physiology, clinical events, and health care systems to forecast which interventions will be most effective in reducing a person's risk, provide risk stratification metrics for individual patients, and project benefits for specific interventions.

VIRGINIA

Carilion New River Valley Medical Center: Improving Health for At-Risk Rural Patients (IHARP)

Geographic Reach: Virginia

Funding Amount: \$4,162,618

Estimated 3-Year Savings: \$4,308,295

Summary: Carilion New River Valley Medical Center, in partnership with Virginia Commonwealth University School of Pharmacy, Aetna Healthcare and CVS/Caremark, is receiving an award to improve medication therapy management for Medicare and Medicaid beneficiaries and other patients in 23 underserved rural counties in southwest Virginia. Their care delivery model, involving six rural hospitals and 17 primary care practices, will train pharmacists in transformative care and chronic disease management protocols.

The Rector and Visitors of the University of Virginia: Proactive Palliative Care and Palliative Radiation Model

Geographic Reach: Virginia

Funding Amount: \$2,571,322

Estimated 3-Year Savings: \$2,920,639

Summary: The Rector and Visitors of the University of Virginia is receiving an award to improve care for patients with advanced cancer. The program will integrate data from multiple sources to help providers proactively identify opportunities for evidence-based care interventions that have been shown to improve quality of care, increase survival, and reduce costs. In addition to various aspects of care, the program includes a specific redesign of radiation therapy to provide highly effective single-day treatment for cancer that has spread to the bone.

WASHINGTON

Kitsap Mental Health Services: Race to Health/Coordination, Integration, and Innovations in Care

Geographic Reach: Washington

Funding Amount: \$1,858,437

Estimated 3-Year Savings: \$5.8 million

Summary: Kitsap Mental Health Services of Kitsap County, Washington, is receiving an award to integrate care for one thousand severely mentally ill or severely emotionally disturbed adults and children, many of them Medicare, Medicaid, and/or CHIP beneficiaries, with at least one co-morbidity.

Prosser Public Hospital District: Prosser Washington Community Paramedics Program

Geographic Reach: Washington

Funding Amount: \$1,470,017

Estimated 3-Year Savings: \$1,855,400

Summary: Prosser Public Hospital District, serving a large, rural area in Washington State, is receiving an award for a program through which physicians can send a community paramedic (CP) to visit a patient of concern, providing in-home medical monitoring, follow-ups, basic lab work, and patient education.

WISCONSIN

Children's Hospital and Health System, Inc: CCHP Advanced Wrap Network

Geographic Reach: Wisconsin

Funding Amount: \$2,796,255

Estimated 3-Year Savings: \$2,851,266

Summary: The Children's Hospital and Health System, Inc., partnering with Children's Hospital of Wisconsin, Aurora Healthcare, and Wheaton Franciscan Healthcare, is receiving an award to create an Advanced Wrap Network Model (AWN) of culturally sensitive professional, clinical, and social resources to educate Children's Community Health Plan (CCHP) members on how to effectively navigate the health care system. This intervention, targeted at Medicaid and CHIP beneficiaries in southeastern Wisconsin, will deploy Nurse Navigators and Community Health Navigators to increase use of primary care health homes and reduce emergency room visits and inpatient hospital admissions for beneficiaries.

WYOMING

Memorial Hospital of Laramie County DBA Cheyenne Regional: Wyoming/A Frontier State's Strategic Partnership for Transforming Care Delivery

Geographic Reach: Wyoming

Funding Amount: \$14,246,153

Estimated 3-Year Savings: \$33,227,238

Summary: Memorial Hospital of Laramie County (the Cheyenne Regional Medical Center) is receiving an award to transform primary care delivery across Wyoming, a State which faces special challenges because of its low population density and limited health care resources. Cheyenne Regional and its partners will retool primary care education, enhance connectivity between hospitals and primary care providers, improve pharmaceutical management of high cost populations, increase medication availability and provider access for vulnerable patients, and address the complex social issues affecting the health of vulnerable populations.

NOT GEOGRAPHICALLY DEFINED

MedExpert International, Inc: Quality Medical Management System (QMMS)

Funding Amount: \$9,332,545

Estimated 3-Year Savings: \$50,410,304

Summary: MedExpert International is receiving an award to test its Quality Medical Management System (QMMS) in comparison to a control group. QMMS is a shared decision-making system that provides consumers with educational materials, physician advice, and assistance with interpreting benefits and treatment options using Medical Information Coordinators and staff physicians. QMMS will be available on a national scale to serve approximately 160,000 Medicare, Medicaid, and CHIP beneficiaries.