



CalOptima Health

Notice of Funding Opportunity: Quality Improvement Grant Program (QIGP) Medi-Cal Program Year 1 (2024)

*CalOptima Health is accepting applications for the fiscal year 2023-2024 (FY24)
Quality Improvement Grant Program*

Application Deadline — August 23, 2024 (5 p.m. PDT)

Background

CalOptima Health's mission is to serve member health with excellence and dignity, respecting the value and needs of each person. With a strategic goal of improving performance for the Managed Care Accountability Sets (MCAS) quality measures, CalOptima Health is accepting applications for the fiscal year 2023-2024 (FY24) Quality Improvement Grant Program. The purpose of this program is to provide support to Health Networks, community clinics, and CalOptima Health Community Network (CHCN) primary care providers for the planning and implementation of quality improvement activities providing services to CalOptima Health Medi-Cal members.

In response to the ongoing need for enhanced health care quality and patient outcomes, particularly in underserved communities, our organization recognizes the imperative to implement a Quality Improvement Grant Program. Through this initiative, we aim to address systemic challenges and disparities within health care delivery systems, fostering innovation, collaboration, and sustainability in quality improvement efforts.

The program is designed to empower health care providers, Health Network organizations, and community clinics to identify, implement, and evaluate evidence-based practices that drive measurable improvements in health care quality. By providing financial support, the grant program seeks to catalyze transformative change across various health care settings, ultimately improving the health and well-being of our patient population.

CalOptima Health will begin accepting applications on July 22, 2024 via email. Applicants should send their proposals to qualitygrants@caloptima.org.

Program Requirements

CalOptima Health will accept projects and programs that provide direct support to improve quality outcomes for CalOptima Health Medi-Cal members only.

Measures of focus must be from the MY2024 Pay for Value (P4V) Program. Applicants may submit grant applications for individual measures or groups of measures under each domain (please see appendix A). A Health Network that performs below the Department of Health Care Services (DHCS) minimum performance level (MPL) must submit a grant application for the measure below the MPL, as part of a corrective action plan.

Grant funding will be for a one-year period starting from the grant issue date.

All participants are required to complete the Quality Grant Application Form (appendix B) for each grant request. The Quality Grant Application Form should outline how the applicant will use the funds requested to improve quality outcomes for CalOptima Health Medi-Cal members. Forms should be submitted to the Quality Analytics Team qualitygrants@caloptima.org by the application deadline. The Quality Grant Application Form includes the following sections:

Project Scope

- Measures of focus must be from the MY2024 P4V Program. Applicants may submit grant applications for individual measures or groups of measures under each domain (please see appendix A).
- Projects may target areas such as chronic disease management, preventive care, patient engagement, care coordination, or health care disparities reduction.

Evidence- or Best Practice-Based Approach

- Applicants must demonstrate the use of evidence-based practices or interventions in their proposed projects. Applicants may also select from the recommended best practices provided in appendix C.
- It is recommended that projects incorporate quality improvement methodologies such as Plan-Do-Study-Act (PDSA) cycles or Six Sigma principles.

Measurable Outcomes

- Applicants must define clear and measurable outcomes related to quality measure improvement.
- Outcome measures should be relevant, achievable, and aligned with the project objectives.

Sustainability Plan

- Applicants must outline a sustainability plan to ensure the continuation of quality improvement efforts beyond the grant period.
- Sustainability plans may include strategies for integrating successful practices into routine operations, securing additional funding sources, or leveraging community resources.

In addition to the Quality Grant Application Form, applicants must also provide a budget outlining how grant funds will be utilized to support the project (please see appendix D for an example).

Evaluation and Reporting

Applicants must provide quarterly budget updates to CalOptima Health throughout the grant period.

Applicants must also provide quarterly project progress reports that provide insight into the number of CalOptima Health members positively impacted for each measure of focus. In lieu of member-level impact, applicants may provide insight into the impact to the overall measure rate (i.e. the change in compliance rate as compared to same time last year).

Grant Budgets, Amounts and Duration

Grant amounts may range from \$50,000 to \$250,000 per measure/measure group. The number and amounts of grants awarded will be contingent upon available funds and determination of acceptable grants.

Allowable Expenses

Allowable expenses for QIGP funds can include the hiring and onboarding of staff if they provide services to CalOptima Health members only. Funds can also be used to purchase equipment and supplies to provide clinical services to CalOptima Health members, such as the purchase of a lead testing machine and test strips to test children for lead, or the purchase of fluoride varnish.

Note: Funds may not be used for administrative functions. Funds must be used to provide direct support to improve quality outcomes for CalOptima Health Medi-Cal members only.

Funding Priority	Total Amount Available
Quality Improvement Grant Payment Program (QIGP): Program Year 1 (2024) Opportunity	Grant amounts may range from \$50,000 to \$250,000 per measure/measure group. The number and amounts of grants awarded will be contingent upon available funds and determination of acceptable grants.

Entities Eligible to Apply

This funding opportunity is designed to support contracted provider entities including:

1. Health Networks
2. Community clinics
3. CalOptima Health Community Network (CHCN) primary care providers

Proposal Evaluation Criteria

	Criteria	Max Points	Description of Basis for Assigning Points
	Eligibility	Pass/Fail	<ul style="list-style-type: none"> • Must be one of the following contracted provider entities: <ul style="list-style-type: none"> ○ Health Network <ul style="list-style-type: none"> ▪ The affiliated Health Network is not contract deficient as defined by CalOptima Policy and Procedure GG.1631, Health Network Contract Performance Measure, in the measurement and incentive distribution years. ○ Community clinic ○ CalOptima Health Community Network (CHCN) primary care provider
1	CalOptima Health Core Mission and Value Alignment	10	<ul style="list-style-type: none"> • Project aligns with the CalOptima Health mission, vision, and values statements. • Proposed program demonstrates value to the CalOptima Health membership and the Medi-Cal program.
2	Proposed Program Design	20	<ul style="list-style-type: none"> • The proposed program is in alignment with the goals and objectives of the grant program as outlined in the Notice of Funding Opportunity. • The proposed program is clearly described and addresses measures from the MY2024 P4V Program. • The proposed program includes innovative, evidence-based practices or interventions that aim to significantly increase quality measure performance within the funding period. • The proposed program incorporates quality improvement methodologies such as PDSA cycles or Six Sigma principles. • Programs that positively impact multiple quality measures are preferred.
3	Project Implementation Plan & Measurable Outcomes	20	<ul style="list-style-type: none"> • Provides a clear and complete implementation plan with well-defined project milestones and timeframes. • Measurements are objective, quantifiable, and based on scientific knowledge or clinical practice guidelines. • Appropriate goals and/or benchmarks are included. • Quantitative data analysis and identification of root causes are included. • Re-measurement is conducted at appropriate intervals. • Clearly indicates that the program will be up and running within 3 months of grant award.
4	Equity	20	<ul style="list-style-type: none"> • Project demonstrates a commitment to advancing health equity. • Project aims to address health disparities (e.g., reduce the non-compliance with mammography screenings for a group that is performing lower than another group).

5	Demonstration of Sufficient Staffing and Resources	10	<ul style="list-style-type: none"> An itemized budget is included and is aligned with the objectives and activities of the project. Resources will be used to provide direct support to improve quality outcomes for CalOptima Health Medi-Cal members only. Applicant has identified staff to participate on the project.
6	Organization Experience and Program Capacity	10	<ul style="list-style-type: none"> Applicant has demonstrated experience needed to perform the program. Applicant is a stable organization and has demonstrated capacity to perform the functions of the program.
7	Sustainability	10	<ul style="list-style-type: none"> Identifies potential funding sources for sustainability of the project/program after the end of the grant agreement.
Total Earnable Points		100	

Application Timeline

Action	Date
Application Release Date & Submission Window Opens	July 22, 2024
Informational Meeting / Q&A	August 1, 2024
Application Deadline	August 23, 2024 at 5 p.m.
Internal Review	August - September 2024
Announcement of Approved Grants	September 23, 2024

Questions?

Please forward any questions about the grant opportunity or application process to the Quality Analytics Team at qualitygrants@caloptima.org.

Appendix A: MY2024 Pay for Value (P4V) Program Measures

Measures of focus must be from the MY2024 P4V Program. Applicants may submit grant applications for individual measures or groups of measures under each domain. A Health Network that performs below the DHCS MPL must submit a grant application for the measure below the MPL, as part of a corrective action plan.

Domain	Measure
Cancer Prevention Measures	Breast Cancer Screening (BCS-E)
	Cervical Cancer Screening (CCS)
Children’s Health Measures	Child and Adolescent Well-Care Visits: Total (WCV)
	Childhood Immunization: Combo 10 (CIS)
	Development Screening in the First Years of Life (DEV CMS)
	Immunization for Adolescents: Combo 2 (IMA)
	Lead Screening in Children (LSC)
	Topical Fluoride in Children (TFL CMS)
	Well-Child Visits in the First 30 Months of Life: First 15 Months (W30)
	Well-Child Visits in the First 30 Months of Life: 15 Months – 30 Months (W30)
Reproductive Health Measures	Chlamydia Screening in Women: Total (CHL)
	Prenatal and Postpartum Care: Prenatal Care (PPC)
	Prenatal and Postpartum Care: Postpartum Care (PPC)
Behavioral Health Measures	Follow-Up After ED Visit for Mental Illness: 30 days (FUM)
	Follow-Up After ED Visit for Substance Abuse: 30 days (FUA)
Chronic Disease Management Measures	Asthma Medication Ratio (AMR)
	Controlling Blood Pressure (CBP)
	Glycemic Status Assessment for Patients with Diabetes: Poor Control (GSD)
Member Experience (CAHPS Survey) Measures	Coordination of Care
	Getting Care Quickly
	Getting Needed Care
	Rating of Health Care
	Rating of Health Network
	Rating of Personal Doctor
	Rating of Specialist Seen Most Often

Appendix B: Quality Grant Application Form

Quality Grant Application Form
Organization Name:
Proposed Program Title:
Date of Submission:
Line of Business: Medi-Cal
Point of Contact (Name, Role, and Email Address):
Total Grant Request from CalOptima Health:
A. Measures of Focus. Select the measures from appendix A that your grant application will focus on.
<input type="checkbox"/> Breast Cancer Screening (BCS-E) <input type="checkbox"/> Cervical Cancer Screening (CCS) <input type="checkbox"/> Child and Adolescent Well-Care Visits: Total (WCV) <input type="checkbox"/> Childhood Immunization: Combo 10 (CIS) <input type="checkbox"/> Development Screening in the First Years of Life (DEV CMS) <input type="checkbox"/> Immunization for Adolescents: Combo 2 (IMA) <input type="checkbox"/> Lead Screening in Children (LSC) <input type="checkbox"/> Topical Fluoride in Children (TFL CMS) <input type="checkbox"/> Well-Child Visits in the First 30 Months of Life: First 15 Months (W30) <input type="checkbox"/> Well-Child Visits in the First 30 Months of Life: 15 Months – 30 Months (W30) <input type="checkbox"/> Chlamydia Screening in Women: Total (CHL) <input type="checkbox"/> Prenatal and Postpartum Care: Prenatal Care (PPC) <input type="checkbox"/> Prenatal and Postpartum Care: Postpartum Care (PPC) <input type="checkbox"/> Follow-Up After ED Visit for Mental Illness: 30 days (FUM) <input type="checkbox"/> Follow-Up After ED Visit for Substance Abuse: 30 days (FUA) <input type="checkbox"/> Asthma Medication Ratio (AMR) <input type="checkbox"/> Controlling Blood Pressure (CBP) <input type="checkbox"/> Glycemic Status Assessment for Patients with Diabetes: Poor Control (GSD) <input type="checkbox"/> Coordination of Care <input type="checkbox"/> Getting Care Quickly <input type="checkbox"/> Getting Needed Care <input type="checkbox"/> Rating of Health Care <input type="checkbox"/> Rating of Health Network <input type="checkbox"/> Rating of Personal Doctor <input type="checkbox"/> Rating of Specialist Seen Most Often

B. Project Scope. Provide a brief overview of the program (500-800 word count). Explain your rationale for why this program will improve quality outcomes for CalOptima Health members *and* why there is an opportunity for improvement. Use objective information (data) wherever possible.

C. Planned Intervention(s) and Best Practice-Based Approach. Describe your program’s interventions. Explain how your program will utilize evidence-based practices. Describe how your program will incorporate quality improvement methodologies such as Plan-Do-Study-Act (PDSA) cycles or Six Sigma principles.

D. Measurable Outcomes. Explain how the interventions will impact performance for the measures of focus. For example, provide the overall measure rate your program aims to achieve, or the number of members your program aims to positively impact. Ensure that each measure of focus has an outcome listed; add rows as needed to support this.

Quantifiable Measure #1: (required)	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	
Quantifiable Measure #2:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	
Quantifiable Measure #3:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	

Quantifiable Measure #4:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	
Quantifiable Measure #5:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	
Quantifiable Measure #6:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	
Quantifiable Measure #7:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	
Quantifiable Measure #8:	
Baseline numerator:	
Baseline denominator:	
Baseline rate:	
Goal (measure rate or number of members impacted):	

E. Sustainability Plan. Describe how your proposal will result in sustainable impacts beyond the grant period.

Appendix C: Sample Best Practices / Initiatives

- Dedicate resources to provide in-person or telehealth visits to members after emergency room visits or inpatient discharges.
- Provide members with at-home testing for hemoglobin A1c, colorectal cancer screening, bone density, etc.
- Offer health coaching, community classes, care coordination, and/or education to members with chronic conditions (such as hypertension and diabetes).
- Create a call center or dedicated team to complete telephonic outreach to members to schedule needed services (e.g. a PCP visit, a mammogram, a lab appointment, etc.).
- Hold a health fair, community, or onsite event for members to complete screenings such as blood pressure, hemoglobin A1c testing, survey-based screenings, vaccinations, etc.
- Purchase lead testing machines and test strips to complete point-of-care blood lead testing for pediatric members.
- Purchase fluoride varnish and train staff to complete point-of-care application of topical fluoride to pediatric members.
- Purchase a camera to screen members for diabetic retinal disease in the PCP office setting.
- Dedicate Pharmacists to assist members in converting prescriptions from a 30- to 90-day supply to improve medication adherence.
- Dedicate Pharmacists to complete medication reconciliation after transitions of care.
- Dedicate Pharmacists to offer members personalized medication reviews and consultations via phone or telehealth.
- Utilize mobile mammography to screen women due for the Breast Cancer Screening measure.

Appendix D: Sample Itemized Budget

Planned Expenses												
	September	October	November	December	January	February	March	April	May	June	July	August
Employee Costs												
Wages												
Subtotal												
Clinical Supplies												
Fluoride Varnish Kits												
Subtotal												
Total												