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# Medicaid Technical Assistance and Policy Program <br> Providers as Allies in Equity and Care (PAEC) Request for Applications 

"Health inequalities are the result of more than individual choice or random chance. They are the result of the historic and ongoing interplay of inequitable structures, policies, and norms that shape lives."1

Application Release Date: June 28, 2018
Application Due Date: July 16, 2018, 5:00 PM (EST)

## Submission deadline has been extended to July 23, 2018, 12:00 PM (EST)

In partnership with the Ohio Department of Medicaid and the Medicaid Technical Assistance and Policy Program, the Ohio Colleges of Medicine Government Resource Center (GRC) is seeking applications for the Providers as Allies in Equity and Care (PAEC) initiative to create virtual reality experiences and patient simulations for Medicaid providers. Eligible institutions include the following: Case Western Reserve University, Northeast Ohio Medical University, Ohio University, The Ohio State University, University of Cincinnati, University of Toledo, and Wright State University. The Ohio Department of Medicaid is interested in advancing health equity for the Medicaid population by increasing Medicaid provider cultural competency and awareness of implicit bias. This will be accomplished through training composed of virtual reality and simulated patient experiences that will include direct interpersonal feedback related to the interaction of patients and families in a variety of challenging circumstances.

Funded entities will develop virtual reality (VR) experiences and/or patient simulation(s) experiences through collaboration with other funded entities and appropriate partners to deliver comprehensive simulation packages across the Ohio region. VR technology is strongly preferred, with the understanding that it must be accessible to provider locations for training. ODM encourages each applicant to submit multiple ideas that differ in challenging experiences and populations served to better understand bias and the impact on equity in healthcare. In addition to a simulated office visit or hospital interaction, ODM is interested in virtual reality experiences and simulations that encompass patients' preparation for the visit, including transportation, medical office interactions, the clinician visit, and/or the experience of filling a prescription. Partnerships with community colleges and institutes of technology are strongly encouraged. Funded entities are encouraged to meet with experts and community-based organizations serving the population profiled in the VR experiences or simulation(s) as they are developed.

Institutions will be required to share VR experiences and simulation scripts so that all trainings may be delivered regionally for collective impact and efficiencies. Funded entities will be required to collaborate with other academic medical centers or health sciences colleges and universities in the state, in addition to clinics such as FQHCs, community partners, health professions associations (e.g. OAFP, Ohio AAP) and residency sites, to deliver the entire simulation bundle in their respective region of the state.

All simulations must address at least one social determinant of health (SDOH) ${ }^{2}$ :

[^0]Each of these five determinant areas reflects a number of key issues that make up the underlying factors in the arena of SDOH.

- Economic Stability
- Employment
- Food Insecurity
- Housing Instability
- Poverty
- Education
- Early Childhood Education and Development
- Enrollment in Higher Education
- High School Graduation
- Language and Literacy
- Social and Community Context
- Civic Participation
- Discrimination
- Incarceration
- Social Cohesion
- Health and Health Care
- Access to Health Care
- Access to Primary Care
- Health Literacy
- Neighborhood and Built Environment
- Access to Foods that Support Healthy Eating Patterns
- Crime and Violence
- Environmental Conditions
- Quality of Housing

Below is a non-exhaustive list of potential patient simulation ideas for an office visit encounter and/or what the patient experiences on a typical day:

- African American, Asian (partner with Commission on Minority Health)
- Lesbian Gay Bisexual Transgender Questioning Queer (LGBTQQ)
- Newly placed foster youth with foster parents
- New mother with other children and no personal vehicle
- Diabetic amputee who lives independently
- Pregnant woman with history of Opioid Use Disorder (OUD)
- Pregnant woman with history of preterm birth
- Immigrant/Refugee with limited English proficiency
- Nursing home resident with Alzheimer's and limited family


## Records Documents and Information

The vendor agrees that any media produced pursuant to this Agreement or acquired with vendor funds will become the property of ODM. Media includes all documents, reports, data, photographs (including negatives), hardware, software and electronic reports and records. ODM will maintain the unrestricted right to reproduce, distribute, modify, maintain, and use the media in any way ODM deems appropriate. The vendor further agrees not to seek or obtain copyright, patent or other proprietary protection for any materials or items produced under this Agreement. The vendor understands that all materials and items produced under this Agreement will be made freely available to the public unless ODM determines that certain materials are confidential under federal or state law. The vendor reserves the right to use such materials and items for research and academic purposes provided information deemed confidential by ODM is treated as such.

## Application must include the following:

A. Applicant's VR/simulated patient form(s); See Appendix A

- If submitting more than one simulation, please submit separate forms for each idea
B. Applicant's plan for regional delivery of the simulation package (maximum of 2 pages, single-sided, singlespaced, with 1-inch margins)
- Coordination of the simulation package delivery to specific counties of the state through collaboration with other academic medical centers or health sciences colleges and universities in the state, in addition to clinics, community partners, health professions associations (e.g. OAFP, Ohio AAP) and residency sites
- Description of applicant's proposed strategy for delivering the simulation to regional Medicaid providers, including simulation delivery to community locations that will reach an increased amount of Medicaid providers
C. Applicant's experience in working with Medicaid providers and community-based organizations (maximum of 2 pages, single-sided, single-spaced, with 1-inch margins)
- Evidence and type of previous community partnerships
- Outcomes of previous community partnerships
- Evidence of knowledge and/or experience in addressing cultural and linguistic competency within the applicant's health service delivery region
D. Applicant's method for conducting an internal evaluation of the simulation (maximum of 1 pages, single-sided, single-spaced, with 1-inch margins)
E. Applicant's organizational capacity (e.g. staffing, technology, etc.) to undertake the work (maximum of 1 pages, single-sided, single-spaced, with 1-inch margins)
F. Evidence of Applicant's experience working with other academic medical centers, health sciences colleges and universities, community colleges, training programs, or clinical sites in the selected topic area, from those identified above or in work that is similar in nature and could help to support the project, including published research and/or outcomes from previous experience (maximum of 2 pages, single-sided, single-spaced, with 1inch margins)
G. Brief description of key personnel that will participate in the project (maximum of 2 pages, single-sided, singlespaced, with 1-inch margins)
H. Brief description of proposed subcontractors and/or partners (maximum of 2 pages, single-sided, single-spaced, with 1-inch margins)
I. Brief description of proposed evaluation plan (maximum of 1 page, single-sided, single-spaced, with 1-inch margins)
J. Principal Investigator Curriculum Vitae (Not counted as part of the page limit)
K. Budget (Appendix B) and budget justification narrative (Appendix C) for planning, test delivery, and bundle delivery (SFY19)


## Total proposal page limit for items B-I: 13 pages

## Project Deliverables: August 15, 2018 - June 30, 2019

- Obtain commitments from appropriate partners
- Collaboration for delivery and development
- Develop simulations and share toolkit/resources with partners
- Deliver simulations
- Evaluate simulations
- Other deliverables as outlined in approved project proposal
- Submit monthly invoices
- Submit quarterly progress reports and a final report


## Available Funding:

- SFY 2019 (August 15, 2018 - June 30, 2019): Up to \$7,000,000 in FFP dollars, not including cost share.
- FFP funding will serve as the funding source for $49 \%$ of this initiative. Applicants are required to provide and certify $51 \%$ of total allowable project costs through the identification of non-federal matching funds supporting the goals of this initiative.

Please note that ODM limits F\&A (indirect rate, overhead) reimbursements to $10 \%$ of total project costs.
Funding requests may include:
A. Project direct costs (e.g., training support for Principal Investigators, faculty and Medicaid providers);
B. Support for training and technical assistance activities under this initiative for qualified faculty, residents, fellows, and Medicaid providers; and
C. Support for program development.

Funding Restrictions: Funds may not be used for certain project expenses. These include:
A. Capital expenses;
B. Establishing loan repayment programs;
C. Billing for Medicaid reimbursable services; and
D. Payment for continuing medical education units.

Questions regarding this Request for Applications may be emailed to Lindsay Popa at: Lindsay.Popa@osumc.edu.
Questions will be accepted until July 6, 2018 at 12:00 PM Noon EST.
Applications are due by July $16^{\text {th }}$, 5:00 p.m. (EST) to Lindsay.Popa@osumc.edu.
Applications will be reviewed by the Ohio Department of Medicaid. Decisions will be communicated by August 1, 2018. This work, as part of MEDTAPP, will support the efficient and effective administration of the Medicaid program.

Appendix A: VR/Simulation Form

| Institution Name: |
| :--- |
| Simulation Title: |
| External partners: |
| Internal partners (those inside the institution): |
| Virtual Reality/Simulated Patient Description (1000 words or less): |
| Social Determinants of Health to be Addressed (500 words or less): |

Appendix B: Budget Template

## Budget Narrative SFY 19

Healthy University

## Instructions: Please break out the budget by simulation.

To accurately assess the cost of each simulation, please break out the cost for the activity by personnel, supplies, equipment, travel, training support, other, and indirect costs.

EXAMPLE:

## Simulation 1 Title: Pregnant woman with history of opioid use disorder

## PERSONNEL

- Gary Smith, MD, Professor and Chair, Department of Psychiatry, School of Medicine, Healthy University will serve as the Principal Investigator for aspects of the project related to the development of the script. Dr. Smith will work as a member of the Steering Committee team to work with the faculty in pharmacy and psychiatry to develop the necessary training components. Dr. Smith will devote . 1 FTE and receive $\$ 20,000$ in salary and benefits for SFY 2018 from the project sponsor. The Association of Interprofessional Education will provide \$18,000 as cost share in SFY 2018.
- Jean Scott, MD, Associate Professor, Department of Pharmacy, Healthy University will serve as the lead faculty from the Department of Pharmacy and serve on the Steering Committee team. Dr. Scott will work with faculty in pharmacy and psychiatry to develop the necessary training components. Dr. Scott will devote . 08 FTE and receive $\$ 17,500$ in salary and benefits from the project sponsor. The Association of Interprofessional Education will provide $\$ 25,000$ in cost share in SFY 2018.
- Practicum Coordinator TBN (.3 FTE, \$10,000 from project sponsor; \$12,000 Cost Share) This individual will assume responsibility for identifying and serving as a liaison to clinic sites, sharing responsibilities of hosting the webinars, and achieving program goals. This position will develop modules of specialization as it relates to behavioral health, develop a plan for fiscal sustainability of the program, coordinate travel to clinic sites, coordinate the speaker series and integrate the interprofessional case modules for the tools and resources.

Personnel FFP Total: \$47,500
Personnel Cost Share Total: \$55,000

## SUPPLIES

- Supplies
- These funds will be used to purchase supplies and materials that will be used to create tools and resources (\$1,500 is being requested from the sponsor in SFY 2019).

Supplies FFP Total: 1,500
Supplies Cost Share Total: \$0

## EQUIPMENT

- A laptop is being requested to coordinate materials across departments during meetings for \$1,500 in sponsor costs for SFY 2018.
- A portable projector is being cost shared at \$3,000 in SFY 2018.
- A total of $\$ 2,500$ from the sponsor is being requested to purchase technology for becoming a Project Echo Hub. A total of $\$ 2,500$ will be cost-shared for the technology.


## Equipment FFP Total: \$4,000

Equipment Cost Share Total: \$5,500

TRAVEL

- A total of $\$ 4,500$ is being requested from the sponsor for 3 people to attend the Interprofessional conference in Pittsburgh, Pennsylvania. Costs are anticipated to be no more than $\$ 1,500$ per person including meals, travel, lodging and conference fees.
- A total of $\$ 5,000$ from the sponsor is being requested to travel for Project Echo training.

Travel FFP Total: \$9,500
Travel Cost Share Total: \$0

## OTHER

- A total of $\$ 500$ from is being cost shared for recruitment activities in the colleges of Pharmacy and Psychiatry
- A total of $\$ 1,000$ from the sponsor is being requested for guest speakers to discuss the importance of interprofessional team based care in behavioral health. The speakers will provide case studies to the residents and fellows.
- A total of $\$ 10,000$ from is being cost shared to integrate interprofessional case modules that have already been developed by Awesome University.

Other FFP Total: \$1,000
Other Cost Share Total: \$10,500

## INDIRECT COSTS:

Total indirect costs for SFY 2019 are \$4,000 for the purchase of equipment.

Total sponsor costs for Simulation 1: \$63,500
Total cost-share for Simulation 1: \$71,000


[^0]:    ${ }^{1}$ National Academies of Sciences, Engineering, and Medicine. 2017. Communities in action: Pathways to health equity. Washington, DC: The National Academies Press. doi: 10.17226/24624
    ${ }^{2}$ https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

