JOHNS HOPKINS HEALTHCARE LLC
POPULATION HEALTH MANAGEMENT RESEARCH GRANT

Deadline: All application materials must be received by 11:59PM on January 31, 2011.
Eligible: All Johns Hopkins University Faculty
Budget: Up to $150,000 total in indirect and direct costs ($75,000 per year)
Grant Period: 2 years
Application: online at http://ictr.johnshopkins.edu/JHHC

Program Overview

Johns Hopkins HealthCare LLC (JHHC) is a partnership between the Johns Hopkins Health System and the Johns Hopkins University School of Medicine to provide a full spectrum of health care products and services. The mission of Johns Hopkins Healthcare (JHHC) is “to improve the lives of our plan members by providing access to high quality, cost effective, member-centered health care in support of the Johns Hopkins Medicine mission of patient care, teaching and research”. In an effort to support the JHHC mission, the partnership will provide funding up to $150,000 for a two-year study period for research project(s) conducted by Johns Hopkins University investigators through a formal application process. The program will be supported and administered by the Johns Hopkins Institute for Clinical and Translational Research (ICTR). The goal of this program is to fund research projects that are aligned with the JHHC strategic priorities, including the design of health care models that reduce costs and improve health, and translational research that leads to improved patient care. Topics of Special Interest to JHHC and to this funding opportunity:

Projects that are related to JHHC strategic priorities and member populations as described will be considered responsive to this FOA. The topics and issues that are related to the strategic priorities of JHHC include, but not limited to the following:

- Diabetes management
- Healthcare Effectiveness Data and Information Set (HEDIS®) Value Based Purchasing Measure topics of interest
  - Adolescent Well Care
  - Asthma Medication
  - Cervical Cancer Screening
  - Diabetic Eye Exam
  - Immunizations
  - Lead Testing
- Post-Partum Exam
- Supplemental Security Income Adult Exam
- Supplemental Security Income Child Exam
- Well Child Exam
  - Substance use treatment
  - High risk pregnancy management in Medicaid population
  - Patient care coordination and quality improvement
  - Health care system models to reduce costs and improve health status in populations

About Johns Hopkins HealthCare LLC

Johns Hopkins HealthCare LLC (JHHC) was created in 1995 as a partnership between the Johns Hopkins Health System and the Johns Hopkins University School of Medicine to provide a full spectrum of health care products and services. A dedicated advocate for our client-employers, patient-members and physicians, JHHC believes that collaboration between the three creates optimal results for patients and healthy financial outcomes for our clients.

Toward that end, JHHC develops and manages contractual relationships with managed care organizations, employers, hospitals, physicians and other health care providers. Services and support include eligibility database management, member physicians’ services, claims adjudication, patient outreach programs and physician/facility network development as well as care management interventions, using clinical and staffing models to enable JHHC to provide support for members with chronic conditions.

JHHC has three lines of business:

- **Employer Health Program (EHP)**
  
  Established in 1996, EHP is a self-funded health plan that serves a variety of clientele in Maryland, southern Pennsylvania, and Northern Virginia. EHP is unique in that it works with employers to identify the characteristics of their workforce and create customized benefits packages that are both flexible and comprehensive. With care management options, a large dental network, 14,000 health care providers and 30 hospitals in Maryland, and a nationwide medical network of 691,000 providers and 3,500 hospitals, the plans meet the needs of all their 55,000 members.

- **Priority Partners MCO (PP)**
  
  Priority Partners is the largest Managed Care Organization authorized by the State of Maryland to provide health care services for over 202,000 Medicaid and Maryland Children’s Health Insurance Program (CHIP) recipients, and over 10,000 Primary Adult Care (PAC) recipients. Established 1997 and owned by JHHC and the Maryland Community Health System, Priority Partners has established a statewide network of
doctors, health centers and hospitals offering low and no-cost doctor visits, vision care, medication coverage, immunizations, hospital coverage, dental care and substance abuse services.

- **Johns Hopkins US Family Health Plan (USFHP)**

  The Johns Hopkins US Family Health Plan (USFHP), a permanent part of the Military Health System, is a Department of Defense designated provider. For over 30 years, USFHP has delivered the TRICARE prime benefit to military retirees and their family members, active duty family members, and survivors of the seven uniformed services, including the Army, Navy, Marine Corps, Air Force, Coast Guard, Public Health Service and the National Oceanic and Atmospheric Administration. USFHP beneficiaries have access to Johns Hopkins Community Physicians, the largest Maryland primary care provider group for the Plan; WellSpan primary care practices located in southern and central Pennsylvania; as well as other community providers.

  While it is not a requirement for funding to draw the study sample from the member populations of plans serviced by JHHC as described above, it is recommended. If the proposed study plans to use non-JHHC plan participants (totally or partially), there must be a clear description of how the data of non-JHHC populations will be obtained. For example, a proposal conducting research on the uninsured would be considered responsive to this Request for Applications if it contained a feasible description of how the study data would be secured by researchers.

**About the Johns Hopkins Institute for Clinical and Translational Research**

The Johns Hopkins Institute for Clinical and Translational Research (ICTR) was established in 2007 with a $100 million Clinical and Translational Science Awards (CTSA) grant from the National Institutes of Health. It is now one of 60 CTSA institutes dedicated to reducing the time it takes for laboratory discoveries to become treatments for patients and engaging communities in clinical research efforts. It also is fulfilling the critical need to train a new generation of clinical researchers. Last year, the Hopkins ICTR programs assisted more than 1,300 Johns Hopkins faculty and staff — representing over 70 different departments throughout the schools of Medicine, Public Health, Nursing and Engineering — with their clinical and translational research projects.

**Program Details**

Eligible submissions must be oriented towards specific milestones, with predicted endpoints and a realistic timeline for completion within the twenty four-month funding period.
Any faculty member at Johns Hopkins University is eligible to apply for this program. Junior faculty are encouraged to apply and will receive extra consideration. However, please be aware that, while most study expenses are eligible for coverage, funding for faculty salary support should be limited and carefully justified.

Undergraduates, graduate students, and postdoctoral fellows are not eligible to apply as Principal Investigators, but can be incorporated as team members into any proposal.

All grants that involve human participants must be approved by an Institutional Review Board (IRB) to receive JHHC funding. While advance approval by the IRB is not a prerequisite for submission of an JHHC application, investigators should be aware of the impact of this and other necessary administrative or regulatory reviews on project timeline and feasibility.

Resubmission of denied grants is strongly discouraged except by invitation from the JHHC Executive Committee, which is made up of JHHC’s president, vice presidents, chief operating officer, and each line of business leader. Unsuccessful applicants may apply in consecutive rounds with substantially different proposals.

**Funding Information**

This grant will provide up to $150,000 for indirect and direct costs for projects as determined by JHHC over a period of 24 months, with half the approved funds distributed in the first 12 months and the remaining half distributed in the second 12 months of the project.

Up to 10% of total costs on this award are allowable as F&A (indirect) cost. This rate is applicable to all subcontracts on this award as well.

JHHC will provide a maximum $25,000 in data mining and statistical analyses in-kind services as part of the $150,000 award total over the 24 month funding period if investigators choose to use JHHC data mining and analysis services. JHHC ’s Research and Development Unit (consisting of a Director of Research and Development, data analysts, biostatisticians, research associates, and research coordinators) can work with study teams to provide claims data, pharmacy data, and lab data on EHP, Priority Partners, or US Family Health Plan populations (as described above) through its data sharing process, described here: [JHHC Data Sharing Committee](#). Additional data management and statistical costs in excess of the $25,000 will require budget justification.

Funds may be used for equipment specific to the technological development of a particular methodology, but unless otherwise noted, equipment costs should not be more than fifty percent of the total grant award.
The initial award will be made for one year. During the first year, investigators will be required to submit progress reports to the Director of Research and Development at six and nine months following funding describing adherence to project timelines and milestones. The nine-month progress report will be reviewed before second-year funding will be awarded. JHHC reserves the right to terminate this award after the first year at the judgment of the Director of Research and Development if timelines and milestones are not satisfactorily met. During the second year, investigators are required to submit a progress report in the 15th month following funding and 90 days following the end of the award.

**Funding Cycle**

JHHC grant proposals will be open for submission at least once every year. University-wide web and email announcements will be sent for each application period. In addition, solicitation will be displayed on the ICTR web site, [http://ictr.johnshopkins.edu](http://ictr.johnshopkins.edu), and sent upon posting to individuals who opt in for ICTR updates via email or news feed. Any changes or alterations to the program and/or the RFA will also be broadcast through these methods. In addition, ICTR-associated faculty and staff are encouraged to assist in communications efforts through their own email contacts and word of mouth.

The submission deadline for the next round of awards is **January 31, 2012**. All application materials must be received by 11:59:59 PM on January 31, 2012.

**Requirements**

Grants must be submitted through the ICTR Connection Request form, located on the ICTR web site at [http://ictr.johnshopkins.edu/JHHC](http://ictr.johnshopkins.edu/JHHC).

Materials requested during the online application process will include:

- A short CV or biographical sketch (NIH-format or similar) for each member of the study team (3-page limit per person)

- A comprehensive, itemized budget (provide a detailed year 1, detailed year 2 and overall budget plan). Budgets may be submitted in Microsoft Excel format, with detailed justification that includes salary, supplies, equipment, travel, etc., and any other expenses required per year for the entire project period.

- Research plan (5-page limit, content and format described below in “Research Plan Guidelines”)

- Reference list of up to 30 references (optional)
• Letters of support and letters of commitment from healthcare providers and practices to be involved in the research.

RESEARCH PLAN GUIDELINES

Presentation and Formatting: The research plan must be no longer than five single-spaced pages (including figures) in a font no smaller than 11 points, with margins of at least .5 inches on all sides. Note that references are not included in the five-page limit. The name of the lead investigator(s) should appear in the top right-hand corner of each page. Page numbers should appear on the bottom right-hand corner of each page.

The Research Plan must include the following components:

  o Description of Problem, Significance, and Background
  o Research Design
  o Expected Outcomes
  o Milestones and Timeline for Project Period
  o Dissemination Plan

It is highly recommended that investigators contact Melissa Sherry, Research Coordinator, at msherry@jhhc.com or 410-762-5378, following notice of an award to assist with inclusion of a JHHC co-investigator on the project. Inclusion of a JHHC co-investigator will greatly facilitate the collaboration of JHHC resources, obtaining approval of the JHHC Data Sharing Committee for release of data, and maintaining oversight of the post-award progress of the study.

Terms and Conditions of Award

• At the conclusion of the study, the PI should submit for review (not for approval) the research findings to the Director of Research and Development. The goal of the review is to provide opportunity for comment on the interpretation of the data analysis.

• The PI agrees to provide a final copy of the publication to the Director of Research and Development seven days prior to submission of the abstract, poster or manuscript for comment and review of factual accuracy regarding JHHC’s populations and programs.

Application Process

Electronic filing of proposals

Proposals will be submitted electronically through the ICTR’s Connection Request portal.
Application materials described above may be uploaded through the application form in either Adobe PDF or Microsoft Word. Questions about the application process should be directed to JHHC at cmdr@jhhc.com, or by calling Melissa Sherry, JHHC Research Coordinator, 410 -762-5378.

Review Process

Only complete applications received by the deadline will be considered. The review process will be conducted as follows:

- **Administrative Triage**: ICTR staff will review applications for compliance with budgetary, content, eligibility, and other submission guidelines as described in this document. Incomplete or noncompliant applications will be returned without scientific review.

- **First Round**: Members of the JHHC Research and Development Unit will assess applications in terms of the fit, feasibility, and nature of the proposed project. Applications that do not respond to JHHC strategic priorities will be returned without scientific review, but will be provided a brief description as to why they did not meet initial criteria.

- **Second Round**: Applications that pass the first round of assessment will be sent for scoring to a minimum of two external reviewers with expertise in fields relevant to the science in the proposal. These reviewers will be asked to disclose any relationships to the grant applicant. They will then provide written feedback addressing the merits of the application.

- **Third Round**: Once scored, proposals will be reviewed by representatives of ICTR and the JHHC Research and Development Unit. Further commentary will be added to the ICTR score and presented to the Executive Team of JHHC by the Director of Research and Development.

- **Fourth Round**: The Executive Team of JHHC will review the scientific merit, impact and feasibility of research proposals and make the funding award to the proposal(s) that is/are most responsive to the criteria of the FOA.

- **Notification and Feedback**: All applicants will be notified of funding decisions approximately two months of the submission deadline. The start date of the grant will be the date that funded applicants receive notification of the funding decision. Unless invited to do so, resubmission of unfunded grants is not permitted.