

LESSONS LEARNED: ALIGNING FORCES FOR QUALITY

Transformation Efforts in Health and Health Care: Analysis of Public and Private Sector Investments

ABOUT ALIGNING FORCES FOR QUALITY

Aligning Forces for Quality (AF4Q) was the Robert Wood Johnson Foundation's signature effort to lift the overall quality of health care in targeted communities, as well as reduce racial and ethnic disparities and provide real models for national reform. The Foundation's commitment to improve health care in 16 AF4Q communities represented the largest effort of its kind ever undertaken by a U.S. philanthropy. AF4Q asked the people who get care, give care, and pay for care to work together to improve the quality and value of care delivered locally.

Learn more about AF4Q at www.forces4quality.org. Learn more about RWJF's efforts to improve quality and equality of care at www.rwjf.org/en/our-work.html.



Robert Wood Johnson Foundation

**Aligning Forces
for Quality**

The Federal government, private foundations, and other influential organizations are making unprecedented financial investments in transforming the way health care is delivered in the U.S. Given this, an understanding of the current landscape of funding in the public and private sectors can help leverage strategic opportunities and fill gaps to maximize the impact of initiatives focused on transforming both population health and the health care system.

The Aligning Forces for Quality (AF4Q) project, funded by the Robert Wood Johnson Foundation, was the Foundation's signature effort to improve the quality of health care. The National Program Office (NPO) of the AF4Q project has a unique perspective on the current landscape of public and private sector investments. The NPO has seen communities struggle at the local, regional, and national level to align multiple projects from foundations, the Federal government, and other non-profit organizations. The NPO's vantage point on the challenges faced by regional health care collaboratives has reinforced the imperative of navigating overlapping national initiatives (and funding streams). This document provides a springboard for a much-needed strategic dialogue among organizations to ensure better coordination, to reduce grant fragmentation, and increase impact on shared goals.

FUNDING LANDSCAPE MATRIX

The NPO has created the attached matrix, current as of February 2015, which catalogs relevant projects to inform organizations that are still forming their funding strategy and determining where their dollars have the potential to make the most impact or fill a critical gap (**APPENDIX A**). The matrix can also help organizations on the ground to better understand and plan for where funding gaps may exist in order to leverage existing efforts or propose to fill a programmatic void. The matrix served as the basis for this analysis and the data within it was culled from what was available publicly.

A number of parameters were applied to determine what was included or excluded from this analysis; a few of these parameters are defined below:

- **Organizations:** Private foundations, the Federal government, and other influential organizations (i.e., Institute for Healthcare Improvement) that funded or implemented projects spanning more than one geographic location were included. Projects that focused

on only one community, state, or region were not included. The matrix can be tailored to include a state or region as needed for different users.

- **Topic of Project:** Projects focused primarily on health care transformation were included (e.g., transparency, patient-centeredness, quality improvement, cost). Projects focused solely on health (e.g. obesity, food security) were not included.
- **Funded Entities:** Projects that funded a health care system rather than a state, regional collaborative, or community/multi-stakeholder organization were not included.
- **Resources or Support:** Projects that provided non-monetary support (e.g., technical assistance, access to data) were included in addition to projects that provided funding.
- **Goal:** Projects were categorized as having one of the following three overarching goals: Public/Community Health Transformation, Health Care Delivery Transformation, and Access.
- **Strategy:** Projects were categorized as having one or more of the following seven strategies: transparency; data and measurement; payment reform; advocacy/consumer policy; care coordination; and, communication/education.

In addition to the grant-funded projects detailed in the funding matrix (**APPENDIX A**), there are a number of research projects and scans underway at foundations, think tanks, and non-profit organizations that relate to the topics highlighted in the matrix. These can be found in **APPENDIX B**. They are not included in the matrix because they do not have a community grant component. Organizations falling into this group include Calvert Foundation, the Commonwealth Fund, the Gordon and Betty Moore Foundation, International Consortium for Health Outcomes Measurement, ReadyNation, and the Rockefeller Foundation, among others.

We also acknowledge the Centers for Medicare & Medicaid Services' (CMS) longstanding investment in these areas, but have only included projects that help contribute to a fair representation of opportunities going forward. Detailed information on all of CMS' current work can be found at <http://innovation.cms.gov/initiatives/index.html#views=models>.

This document and analysis represents a moment in time and includes information researched as of February 2015. In order to maintain its relevancy, continual updating is required. Finally, transforming the way that health care is delivered requires local solutions in addition to national investments and policy to catalyze change. We encourage local and regional organizations to augment the matrix to include a state or region as needed for different users.

OPPORTUNITIES FOR ECONOMIES OF SCALE AND STRATEGIC INVESTMENT

Foundations funded 55 percent of the programs included in this analysis, followed by the Federal government at 35 percent (**CHART 1**). Foundations are investing over \$1.2 billion in health care transformation (**CHART 2**). However, the matrix illustrates what would seemingly be an extraordinary opportunity—and one that is currently being missed—for the foundations leading this work, such as the Robert Wood Johnson Foundation, Commonwealth Fund, and California Endowment, to collaborate in a meaningful way to maximize the impact of their investments.

Given the size of the financial investment (over \$1.6 billion) and the ability of the Federal government to influence the health care market through policy and payment, other funders should consider complementing the projects. Strategic, place-based investments by the private sector and philanthropic organizations can make impactful contributions since the scope and reach of federally-funded projects are well-defined and less flexible.

In most cases, community collaboratives are the grant recipients of the philanthropic projects, while states received the funding from the Federal government (CMS, for the purposes of this analysis). There is a growing recognition of community collaboratives or backbone organizations as the best entities to align stakeholders and provide leadership to drive the collaboration necessary to achieve population-level improvements in health care costs, quality, and outcomes. However, there is currently no meaningful national tracking of which funded organizations have been successful in achieving programmatic goals or their best practices.



OVERLAP AND GAPS IN INVESTMENTS

TABLE 1 categorizes the projects by the amount of the investment, goal, and strategy. Without access to more granular information about each project (e.g., the amount of funding allocated to each strategy within a project), it is difficult to analyze the overlap and gaps in goals or strategies. Research has yet to reveal what level of resources should be dedicated to a strategy in order for it to be successful—that is, research does not have answers about how much is the right amount of investment to bring about transformation. Absent this information, we can merely speculate whether the level of resources dedicated to payment reform, for example, is enough to leverage change.

Despite these limitations, a few things are worth noting.

- Of the eleven projects analyzed only three use transparency as a strategy (one out of five public/community health transformation projects).
- Four out of five projects focused on health care delivery transformation use payment reform as a strategy, but only one uses communication/education as a strategy.
- None of the projects focused on health care delivery transformation use advocacy/consumers as a strategy.

APPENDIX B contains project of interest, but not included in this analysis. The national organizations already investing in topics related to health care transformation can be effective partners that may support broader organizational capacity building (e.g., leadership development, communications).

Questions for Funders to Consider:

- Can the major non-government funders develop a strategic roadmap to outline the goals, metrics, and specific topics of the major projects and investments in order to reduce duplicity?
- How to best develop and invest in community collaboratives and backbone organizations?
- How can funders build sustainable organizations and talent within those organizations to be change agents?
- Are there mechanisms for funders to become more nimble and proactively strategize about how smaller investments can complement and accelerate major Federal demonstrations projects?

CONCLUSION

This document provides a jumping off point for funders to have a frank conversation about how to best achieve shared goals and accelerate health care transformation nationally. It represents a moment in time, and more detailed information about the included programs is needed in order to have a meaningful dialogue.

INVESTMENTS IN HEALTH CARE TRANSFORMATION IN THE U.S. AS OF FEBRUARY 2015

CHART 1. Type of Funder by Project

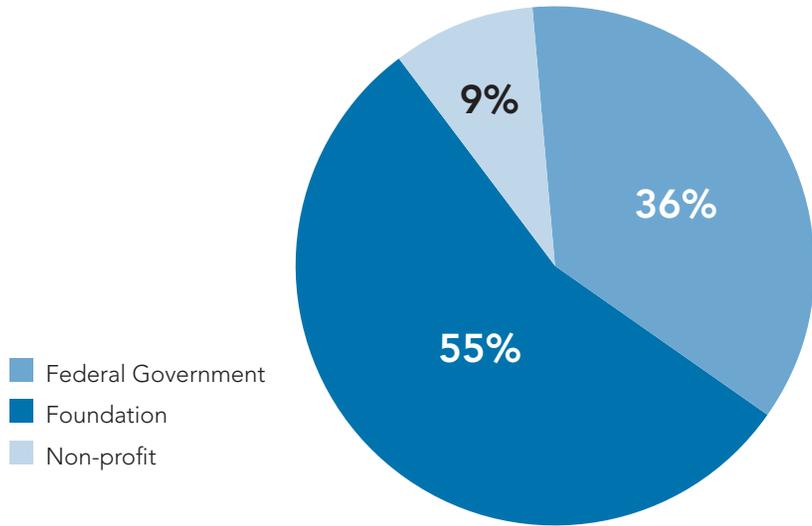


CHART 2. Total Dollar Amount by Funder

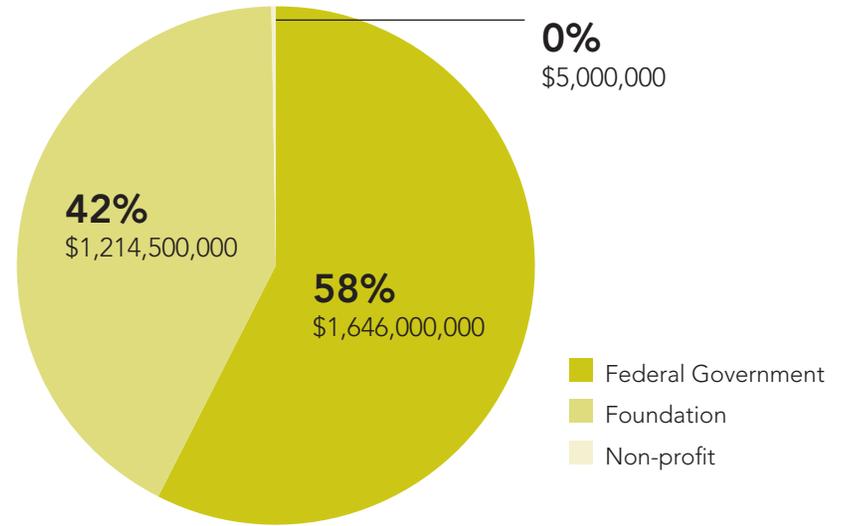


CHART 3. Top Six Funded States by Project

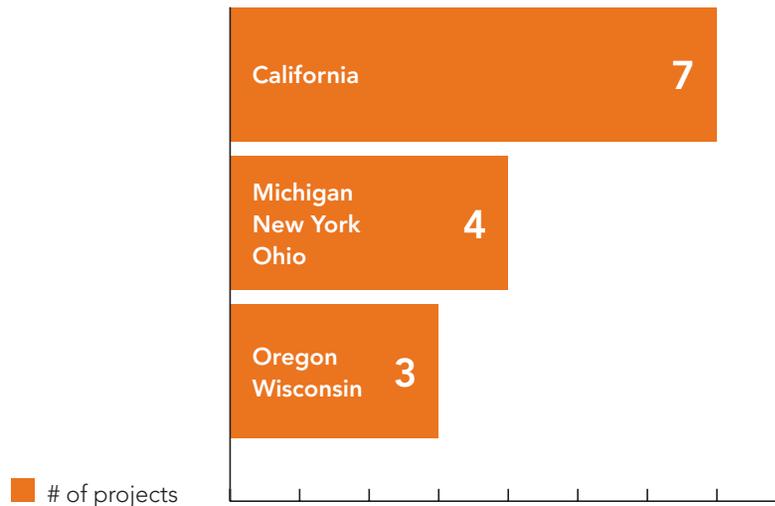


TABLE 1: Dollar Amount, Goal, and Transformation Strategies by Project

PROJECT	\$	GOAL		STRATEGY						
		Public/Community Health Transformation	Health Care Delivery Transformation	Transparency	Data and Measurement	Payment Reform	Advocacy/Consumer	Policy	Care Coordination	Communication/Education
BUILD Health Challenge	\$	•					•	•		•
Building Healthy Communities	\$\$\$	•					•	•		•
Clinton Health Matters Initiative	\$\$	•			•		•		•	•
Way to Wellville	\$	•			•		•	•		•
County Health Rankings & Roadmaps	\$	•		•	•					
SIM Test Awards, Round 2	\$\$\$		•		•	•				
SIM Design Awards, Round 2	\$		•			•				
Transforming Clinical Practice Initiative	\$\$\$		•		•	•			•	•
Comprehensive Primary Care Initiative	\$\$		•			•			•	
Center for Healthcare Transparency	\$		•	•						
The DOCTOR Project	\$		•	•	•					•

\$ < \$100 million
 \$\$ \$100-\$500 million
 \$\$\$ > \$500 million

APPENDIX A: Matrix of Investments as of February 2015

FUNDER/ INFLUENCER	PROJECT NAME	TYPE OF GRANTEE	TIMEFRAME OF FUNDING	AMOUNT OF FUNDING	GOAL	STRATEGY	PROGRAM GOALS/ MEASURES	WEBSITE
Advisory Board Company, de Beaumont Foundation, The Kresge Foundation, RWJF, Colorado Health Foundation	BUILD Health Challenge	Community Collaborative	2015-2017	\$8.5 million	Public/ Community Health Transformation	<ul style="list-style-type: none"> • Advocacy/ Consumer • Policy • Communication/ Education 	Planning and implementation awards to strengthen partnerships among community organizations to improve the health of low-income neighborhoods within cities with populations greater than 150,000.	http://www.buildhealthchallenge.org/
California Endowment	Building Healthy Communities	Community Collaborative	2010-2020	\$1 billion	Public/ Community Health Transformation	<ul style="list-style-type: none"> • Advocacy/ Consumer • Policy • Communication/ Education 	Four "big results" which encompass ten outcomes: 1) provide a health home for all children, 2) reverse the childhood obesity epidemic, 3) increase school attendance, 4) reduce youth violence.	http://www.calendow.org/communities/bhc-landing-page/
Clinton Foundation	Clinton Health Matters Initiative	Community Collaborative	2012-2020	\$200 million	Public/ Community Health Transformation	<ul style="list-style-type: none"> • Data and Measurement • Advocacy/ Consumer • Care Coordination • Communication/ Education 	Neutral convener to pull together stakeholders across sectors to create a Blueprint for Action based on unique health indicators of each community. Reduce the prevalence of preventable health outcomes, close inequities and disparities, and reduce health care costs by improving access to key contributors to health for all people.	https://www.clintonfoundation.org/our-work/clinton-health-matters-initiative
CMS	State Innovation Model Test Awards, Round 2	State Government	2014-2019	\$622 million	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Payment Reform 	Design and test state-led payment and delivery efforts to improve health care quality, accessibility, and affordability.	http://innovation.cms.gov/initiatives/State-Innovations-Model-Testing-Round-Two/index.html
	State Innovation Model Design Awards, Round 2	State Government	2014-2015	\$43 million	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Payment Reform 	Designing and refining innovation plans working with a diverse group of stakeholders.	http://innovation.cms.gov/initiatives/State-Innovations-Model-Design-Round-Two/index.html

FUNDER/ INFLUENCER	PROJECT NAME	TYPE OF GRANTEE	TIMEFRAME OF FUNDING	AMOUNT OF FUNDING	GOAL	STRATEGY	PROGRAM GOALS/ MEASURES	WEBSITE
CMS (continued)	Transforming Clinical Practice Initiative	TBD	2014-2019	\$840 million	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Data and Measurement • Payment Reform • Care Coordination • Communication/ Education 	Improve care and lower costs by helping physicians achieve large-scale health transformation by sharing, adapting, and further developing their QI strategies.	http://innovation.cms.gov/initiatives/Transforming-Clinical-Practices/
	Comprehensive Primary Care Initiative	Practices and Payers	2012-2016	\$141 million in 2013	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Payment Reform • Care Coordination 	Enhanced compensation for high-quality, coordinated, patient-centered care.	http://innovation.cms.gov/initiatives/comprehensive-primary-care-initiative/
HICcup	Way to Wellville	Community Collaborative Foundation Non-profit State Government	2014-2019	\$5 million	Public/ Community Health Transformation	<ul style="list-style-type: none"> • Data and Measurement • Advocacy/ Consumer • Policy • Communication/ Education 	Health impact, financial impact, social/environmental context, sustainability, local priorities.	http://www.hiccup.co/
Laura and John Arnold Foundation	Center for Healthcare Transparency	Non-profit	2014-2020	\$2.3 million	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Transparency 	Make meaningful information on cost and quality available to 50% of the US by 2020.	http://www.nrhi.org/work/multi-region-innovation-pilots/center-healthcare-transparency/
Robert Wood Johnson Foundation	County Health Rankings & Roadmaps	Communities	2011-present	2.4 million (up to \$200 thousand per grantee)	Public/ Community Health Transformation	<ul style="list-style-type: none"> • Transparency • Data and Measurement 	Ranking each county in the 50 US states to show what is known to be making people sick/healthy and showing what can be done to create healthier places to live.	http://www.countyhealthrankings.org/
	The DOCTOR Project	Community Collaborative	2014-2015	\$1.3 million	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Transparency • Data and Measurement • Communication/ Education 	Develop consumer-friendly reports and websites that measure local physicians' adherence to known chronic disease management techniques, preventive screenings, and other factors.	http://www.rwjf.org/en/about-rwjf/newsroom/newsroom-content/2014/03/foundation-launches-project-to-help-people-learn-more-about-the-.html



APPENDIX B: Other Projects of Interest

FUNDER/ INFLUENCER	PROJECT NAME	TYPE OF GRANTEE	TIMEFRAME OF FUNDING	AMOUNT OF FUNDING	GOAL	STRATEGY	PROGRAM GOALS/ MEASURES	WEBSITE
California Health Care Foundation	Better Chronic Disease Care		1996-present	\$35 million per year (from a \$700 million endowment)	Health Care Delivery Transformation	<ul style="list-style-type: none"> Care Coordination 	Improve clinical outcomes and quality of life for Californians with chronic disease.	http://www.chcf.org/programs/chronicdisease
	Innovations for the Underserved				Access	<ul style="list-style-type: none"> Transparency Policy 	Reduce barriers to efficient, affordable health care for the underserved.	http://www.chcf.org/programs/innovations
	Market & Policy Monitor				Health Care Delivery Transformation	<ul style="list-style-type: none"> Transparency 	Promote greater transparency and accountability in California's health care system.	http://www.chcf.org/programs/marketmonitor
	Health Reform & Public Programs Initiative				Access	<ul style="list-style-type: none"> Policy 	Support implementation of health reform and advance the effectiveness of California's public coverage program.	http://www.chcf.org/programs/healthreform
	State Health Policy				Health Care Delivery Transformation	<ul style="list-style-type: none"> Transparency Data and Measurement Policy 	Provide state policymakers and media a valuable local resource and a link to experts.	http://www.chcf.org/programs/statehealthpolicy
	Health Doers Series	Non-profit	2014-2016	\$50,000	Health Care Delivery Transformation	<ul style="list-style-type: none"> Transparency Data and Measurement Payment Reform 	Unknown	http://www.chcf.org/grants/awarded/2014/q4/18633
Corporation for National Community Service, White House	Social Innovation Fund - Pay for Success	Foundation Non-profit University	2014-2017	> \$10 million	Multiple	<ul style="list-style-type: none"> Multiple 	Competition to test Pay for Success approaches.	http://www.nationalservice.gov/programs/social-innovation-fund/pay-success
Institute for Healthcare Improvement	Guiding Coalition for 100 Million Healthier Lives	Communities	2014-2020	Unknown	Public/ Community Health Transformation	<ul style="list-style-type: none"> Data and Measurement Payment Reform Care Coordination Communication/ Education 	100 million people living healthier lives by 2020.	http://www.ihf.org/Engage/Initiatives/100MillionHealthierLives/Pages/default.aspx

FUNDER/ INFLUENCER	PROJECT NAME	TYPE OF GRANTEE	TIMEFRAME OF FUNDING	AMOUNT OF FUNDING	GOAL	STRATEGY	PROGRAM GOALS/ MEASURES	WEBSITE
The Kresge Foundation	Emerging Leaders in Public Health	State Government	2015 - mid 2016	\$1.5 million	Public/Community Health Transformation	<ul style="list-style-type: none"> • Policy • Communication/ Education 	Enhance local public health leaders' abilities to lead in the changing health care environment.	http://kresge.org/news/public-health-teams-around-us-chosen-for-projects-help-communities-enhance-leadership
Living Cities	The Integration Initiative	Community Collaborative	2010-2020	First three years: \$2.77 million in direct grants \$4 million in program-related investments \$15 million of commercial debt	Public/Community Health Transformation	<ul style="list-style-type: none"> • Advocacy/ Consumer • Policy • Communication/ Education 	Testing three strategies to catalyze change - collective impact, public sector innovation, and capital innovation.	https://www.livingcities.org/work/the-integration-initiative
Milbank Memorial Fund	Multi-State Collaborative	Community Collaborative	2009 - Unknown	Unknown	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Policy • Communication/ Education 	Members share data, participate in collaborative learning, and advocate for improved collaboration between states and federal government.	http://www.milbank.org/our-work-with-states/topics-of-interest-to-states/primary-care-transformation
New York State Department of Health	Delivery System Reform Incentive Payment (DSRIP) Program	Hospitals and Medical/ Health Centers	2014-2015	\$6.42 billion	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Data and Measurement • Payment Reform • Care Coordination • Communication/ Education 	The primary goal is to reduce avoidable hospital use by 25% over 5 years. Measures include achieving results in system transformation, clinical management, and population health.	https://www.health.ny.gov/health_care/medicaid/redesign/dsrp/
Peter G. Peterson Foundation	Peterson Center on Healthcare	N/A	Unknown	\$200 million	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Transparency • Payment Reform 	Scale and spread innovative solutions that improve quality and lower costs	http://petersonhealthcare.org/

FUNDER/ INFLUENCER	PROJECT NAME	TYPE OF GRANTEE	TIMEFRAME OF FUNDING	AMOUNT OF FUNDING	GOAL	STRATEGY	PROGRAM GOALS/ MEASURES	WEBSITE
Peterson Center on Healthcare	Peterson-Kaiser Health System Tracker	Foundation	2014-unknown	\$200 million	Health Care Delivery Transformation	• Transparency	Spotlight on performance and spark discussion on how the system can be improved.	http://www. healthsystemtracker. org/
	Most Valuable Care	University	2014-unknown		Health Care Delivery Transformation	• Transparency	Identify high-performance providers, understand what is working, validate results, create change package.	http:// petersonhealthcare. org/most-valuable- care
	Improving Data Usability and Transparency	Non-profit	2014-unknown		Health Care Delivery Transformation	• Transparency	Inform strategies to improve data usability and transparency.	http:// petersonhealthcare. org/improving- data-usability-and- transparency
The Rippel Foundation	ReThink Health	N/A	2007 - present	Unknown	Health Care Delivery Transformation	<ul style="list-style-type: none"> • Payment Reform • Advocacy/ Consumer • Policy • Communication/ Education 	Enabling optimal health for all, assuring access to quality care, promoting equity, productivity, and community vitality, and creating sustainable impact.	http://www. rethinkhealth.org/