



## State Innovation Model (SIM) Practice Request for Application (RFA) Frequently Asked Questions (FAQs)

### 1. What is State Innovation Model (SIM)?

Over a four period, February 2015 through January 2019, the State of Colorado will receive up to [\\$65 million](#) from the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), [Center for Medicare and Medicaid Innovation \(CMMI\)](#) under the State Innovation Model (SIM) program to implement and test its State Health Care Innovation Plan. Colorado's plan, entitled "The Colorado Framework," creates a system of clinic-based and public health supports to spur innovation. The state will improve the health of Coloradans by: (1) providing access to integrated primary care and behavioral health services in coordinated community systems; (2) applying value-based payment structures; (3) expanding information technology efforts, including telehealth; and (4) finalizing a statewide plan to improve population health. CMMI funding will assist Colorado in integrating physical and behavioral health care in more than 400 primary care practices and community mental health centers comprised of approximately 1,600 primary care providers. In addition, the state will work to establish a partnership between their public health, behavioral health and primary care sectors.

### 2. Where can I find out more information about Colorado's SIM program?

For more information about SIM visit their website at: [www.ColoradoSIM.org](http://www.ColoradoSIM.org). To email a question or concern please fill out the [SIM Contact Form](#). This form is located on their website or you can access directly by clicking on the hyperlink.

### 3. What is the SIM Practice Request for Application (RFA)?

The SIM Practice Request for Application (RFA) is a solicitation notice issued by University of Colorado announcing the opportunity for primary care practices to submit an application to be considered for inclusion in the first cohort of 100 practices of the SIM Practice Transformation Program. The Practice RFA describes the SIM program, the benefits and expectations of participation, the required and preferred practice qualifications, the review process and instructions for completing and submitting the application.

### 4. Why is the University of Colorado issuing a SIM practice RFA?

Through an Interagency Agreement (IAA) between the SIM Office and the University of Colorado, the University is providing staff and expertise to convene and facilitate the practice transformation services that are an integral part of the SIM initiative. The University will oversee the process of collecting and initially reviewing primary care practice responses to the RFA and make recommendations to the SIM Office, which will make the final decision on which practices are included in the first cohort to receive practice transformation support beginning in February 2016.

### 5. Where can I find out more information about the SIM Practice RFA?

You can visit the website: [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation)



**6. How can I contact someone at the University of Colorado if I have questions about the SIM Practice RFA?**

Questions related to the SIM Practice RFA may be directed via e-mail to [simpracticeinfo@ucdenver.edu](mailto:simpracticeinfo@ucdenver.edu) or by calling 303-724-8968 to speak to a representative or leave a voicemail. You are also encouraged to check the website [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) for updates to the Frequently Asked Questions (FAQs) area. The FAQs will reflect the questions asked by e-mail and phone, and will be summarized and posted on a weekly basis.

**7. What is the closing deadline for submitting the SIM Practice RFA?**

The closing deadline for submitting the SIM Practice application is October 26, 2015.

**8. How is a practice defined?**

For the purposes of the SIM Practice Transformation Program a practice is defined as a physical location. Some practices have one tax identification number (TIN), with multiple locations. For purposes of the SIM Practice Transformation Program, a practice with one TIN and five locations would be considered five “practices.” In this example, each “practice” would be required to submit their own RFA separately.

**9. What are the minimum requirements a practice must meet in order to be eligible to participate in the SIM Practice Transformation Program?**

In order to be eligible to be considered for inclusion in the SIM Practice Transformation Program, a practice must meet the following eligibility criteria:

- 1) Practice sites must be physically located in Colorado.
- 2) Individual practice sites must complete and submit the application in its entirety before close of business on the posted deadline date.
- 3) Systems or other sponsoring organizations are not allowed to complete applications on the behalf of practice sites.
- 4) As defined by the Institute of Medicine, primary care is the provision of integrated, accessible health care services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.
- 5) An applicant primary care practice must be capable of providing a majority of their patients’ comprehensive primary, preventive, chronic, and urgent care.
- 6) “Non-traditional” practices that provide a full range of primary care services and otherwise meet the requirements can be considered. This could include school-based clinics, local public health clinics, practices providing primary care services to specified groups of patients (such as women’s health clinics), and others.
- 7) Family medicine, general internal medicine, and primary care pediatrics are considered “traditional” primary care.
- 8) Applicant practices that are not clearly traditional primary care practices but feel they provide primary care services will be considered on a case-by-case basis and may be required to provide additional information (such as billing information) to substantiate that they provide comprehensive primary care services. Decisions on eligibility in such cases will be made by a committee convened by the University of Colorado and the SIM Office.



#### **10. How will practices be selected?**

A multi-stakeholder review panel will review the practice applications and make a recommendation to the SIM Office, which will make the final selection of approximately 100 practices that will be offered the opportunity to participate in Cohort 1 of the SIM Practice Transformation Program. The review panel will make their recommendations based on the required and preferred practice characteristics as outlined by the SIM Practice Transformation Workgroup that can be found in the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website.

#### **11. Are there identified quotas or percentages of certain 'types' of practices, such as rural, urban, pediatric, etc. that must be met?**

The SIM Office has identified a target for pediatric practices of 15% within the first cohort. Beyond that, there are no specific quotas or percentages for different practice types, rather the goal to see a diverse mix of practices across types and characteristics including:

- 1) Geographic variation, including various regions of the state, urban and rural.
- 2) Various practice sizes.
- 3) Ownership or administrative variations, including a mix of independent practices, practices in various affiliations such as independent practice associations, practices owned by hospitals or health systems, federally qualified health centers, rural health centers, and others.
- 4) Practices with various primary care disciplines or professions (including advanced practice nursing), as well as those serving children, adults, or all ages.
- 5) Primary care residency practices and other inter-professional training sites. This would also support necessary workforce training and development.
- 6) Practices serving underserved populations, which need to be represented.

#### **12. What happens if more qualified practices apply than there are spots available in the first cohort of this program?**

There is a target of 100 practices to be selected to participate in the first cohort (Cohort 1) that will begin in February 2016. Practices not selected for the first cohort will be made aware of other grant-funded transformation offerings in Colorado that might provide support in their advancement toward high performing primary care and prepare them for participating in future SIM cohorts.

Cohort 2 will consist of approximately 150 practices scheduled to begin in February 2017 and receive two years of transformation support.

Cohort 3 will consist of approximately 150 practices scheduled to begin in February 2018 and receive one year of transformation support. It is possible that there will be additional funding to offer a second year of support for Cohort 3 practices, but that has not been secured to date.

Additionally, more information regarding practice preferred and required characteristics can be found in the document, 'Recommendations for a Minimum Participation Requirements Criteria' located in the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website.



**13. What are the SIM Practice RFA submission requirements?**

Interested applicants should reference the document, 'Recommendations for a Minimum Participation Requirements Criteria' located in the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website. If an applicant fails to submit all of the required documents or does not address each of the topics, the applicant may be considered ineligible to participate in the SIM Practice Transformation Program.

**14. Are there page limits or word limits within the SIM Practice RFA?**

Yes. There are word limits identified within some of the SIM Practice RFA sections; the word limits are noted in each section on the on-line application.

**15. How will practices be evaluated?**

Applicants should reference Section VI Evaluation Process and Selection Criteria to obtain information on how each application will be scored and practices evaluated. This section provides details on the selection criteria and selection process.

**16. When will practices be notified if they have been selected?**

Practices will be notified whether they have been selected for SIM Cohort 1 in December 2015.

**17. How do I get an application?**

The application is available online at [www.ucdenver.edu/PracticeTransformation/PracticeApplication](http://www.ucdenver.edu/PracticeTransformation/PracticeApplication). The SIM RFA document and other related materials can also be found on the UC Denver Practice Transformation website located at [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation).

**18. Can the behavioral health component be addressed through referral relationship with a behavioral health provider (i.e. to community mental health agency) or is it expected to occur within the primary care practice setting?**

SIM recognizes there is a continuum of behavioral health and primary care integration strategies including coordinated care, co-location, and integrated models. It is expected that practices will start at various points along the continuum with the goal of moving towards seamless integration over time. SIM also recognizes that fully integrated models of behavioral health may not be a feasible option for all practices for a variety of reasons. It is also understood that there may be situations when even fully integrated practices will care for patients whose behavioral health needs exceed the practices' expertise or capacity. As such, all practices participating in SIM will be expected to develop methods of coordinated care that include effective referral processes with feedback mechanisms to ensure robust communication among providers in other clinical settings.

**19. For the purposes of the SIM Program, what is intended by the term "behavioral health integration"?**

The Colorado SIM program defines behavioral health integration as the care that results from a practice team of primary care and behavioral health clinicians, working together with patients and families, using a systematic and cost-effective approach to provide patient-centered care for a defined population. This care may address mental health and substance abuse conditions, health behaviors (including their contribution to chronic medical illnesses), life stressors and crises, stress-related physical symptoms, and ineffective patterns of health care utilization.



**20. If our practice already provides integrated behavioral health services through an MOU with a behavioral health provider can we still participate?**

Eligible practices at any stage of behavioral health integration are welcome to apply. This includes practices that already provide integrated behavioral health services at their clinic site. The practice transformation support coordinated by the University of Colorado will focus not only on integrating behavioral health but also on other important aspects of comprehensive primary care delivery as well as incorporating alternative payment models.

**21. What is an MOU?**

Used in the context of the SIM Practice Transformation Program, the acronym MOU stands for a Memorandum of Understanding. An MOU is a document that identifies the expectations of the roles and responsibilities of two or more organizations and is signed by decision makers of both parties.

**22. Are Comprehensive Primary Care Initiative (CPCi) practices eligible to apply, and is there any priority given to a CPCi practice?**

CPCi (also referred to as CPC) practices are eligible to apply and participate in SIM. Applications from CPCi practices will be evaluated using the same criteria as all other practices. Please see questions #9 and #15 within this document visit the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website.

**23. Should our practice apply via our existing relationship with a community mental health center or as an individual primary care office or both?**

Colorado SIM has two different practice transformation assistance efforts: one that is targeted to mental health centers through the Colorado Behavioral Healthcare Council (CBHC) and another that is targeted to primary care practices through the University of Colorado. These are separate programs and practices should apply to receive assistance from the most appropriate effort. This document is primarily focused on providing answers to frequently asked questions related to the practice transformation efforts provided through qualified practice transformation organizations working with the University of Colorado. For more information on the practice transformation assistance efforts targeted to mental health centers through the CBHC please reference their website at <http://www.cbhc.org/sim>.

**24. Is access for the behavior health services intended for the whole population or just for commercially insured patients?**

The practice transformation assistance provided by the University of Colorado applies to an entire practice and is not limited to a patient population based on payer source.

**25. If a practice receives transformation support that is funded under State Innovation Models (SIM), would they be excluded from participation in upcoming transformation programs, like the Transforming Clinical Practice Initiative (TCPI)?**

The Center for Medicare and Medicare Innovation (CMMI) has indicated that they are seeking synergy and alignment between the State Innovation Models (SIM) and the Transforming Clinical Practice Initiative (TCPI). If TCPI is funded in Colorado, it may be possible for clinicians to participate in both TCPI and SIM. CMMI expects Practice Transformation Networks (PTNs) and SIM grantees to work with one another to develop and document synergistic, non-duplicative approaches to work in this arena.



**26. Can practices participating in the following programs- Medicare Shared Savings Plan (MSSP), Pioneer Accountable Care Organizations, or Comprehensive Primary Care Initiative (CPCI) - also participate in SIM?**

Yes, all primary care practices in Colorado are eligible to apply for inclusion in the SIM Practice Transformation Program.

**27. How will practices participating in SIM utilize measurement for results through quality improvement?**

Practice facilitators and clinical health information technology advisors (CHITAs) will work with SIM practices to incorporate data driven quality improvement principles in all facets of the practices' transformation activities. SIM participating practices will be required to have Electronic Health Record (EHR) systems and be able to submit clinical quality measures. More information about measurement can be found in the document, 'SIM Measures' located in the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website.

**28. What measures are required for reporting to participate in SIM?**

The SIM minimal data set is comprised of 18 clinical quality measures. The first cohort of practices will be required to report on a core group of measures depending on the age of their practice population (i.e. children, adult, both). Practices will be expected to report at least three of the core measures on a quarterly basis starting in month six. Quarterly reporting of all core measures will be required by month 12. Clinical health information technology advisors (CHITAs) will be provided by SIM to assist practices in learning how to report the SIM measures. More information about the measures can be found in the document, 'SIM Measures' located in the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website.

**29. Are there penalties to practices that do not meet the expectations and milestones?**

Practices applying to participate in Cohort 1 will be expected to commit to two years of practice transformation work through SIM. All efforts will be made by Colorado SIM, the University of Colorado and the practice transformation organizations (PTOs) to support practices during this time. If a practice finds itself unable to continue to work on SIM activities before their two year commitment is over, they can withdraw from the program.

**30. Can you start the application and come back to it to complete it at a later date?**

Yes. An application package is similar to a file, made up of several forms. Data at the form level will be retained when you close a form. Although your data at the form level will be saved, your application package file WILL NOT be saved unless you actually save the file before closing it down.

**31. How are rural and medically underserved defined? Where can I go to verify that a region is 'underserved'?**

SIM is utilizing the Office of Rural Health Policy definition of rural areas as described by the Health Resources and Services Administration (HRSA), reference: [HRSA Rural Definition](#). Additional information about medically underserved can be accessed here: [HRSA Medically Underserved Information](#). To confirm whether the area you are working in is considered rural go to this link: [Confirming Rural Locations](#).



**32. Are Rural Health Centers and Federally Qualified Health Clinics eligible for this program?**

Yes, all Colorado primary care practices including FQHCs and rural health centers are eligible to participate. If they are interested in participating, they are encouraged to submit an application.

**33. Will there be a forum for those participating in SIM to share “best” and leading practices?**

Yes. Collaborative learning sessions, held twice a year in regions across the state are an integral part of the SIM program. Participating practices will be expected to send at least two or three members of the practice SIM team to two learning sessions per year.

**34. Is there funding to support participation in SIM?**

Practices participating in SIM are eligible for up to \$5,000 from the “Practice Transformation Fund” to help offset the cost of participation including reporting measures, participating in collaborative learning sessions and participating in the evaluation components of SIM. In addition, practices may apply for small grants through the Practice Transformation Fund; these funds will be awarded based on need and innovation. More information about funding can be found in the document, ‘Plan for Administering Transformation Funds’ located in the Resources section on the [www.ucdenver.edu/PracticeTransformation](http://www.ucdenver.edu/PracticeTransformation) website.

**35. Are “non-traditional” primary care practices eligible to participate in SIM?**

“Non-traditional” practices that provide a full range of primary care services and otherwise meet the requirements can be considered. This could include school-based clinics, local public health clinics, practices providing primary care services to specified groups of patients (such as women’s health clinics), and others.

Applicant practices that are not clearly traditional primary care practices but feel they provide primary care services will be considered on a case-by-case basis and may be required to provide additional information (such as billing information) to substantiate that they provide comprehensive primary care services. Decisions on eligibility in such cases will be made by a committee convened by the University of Colorado and the SIM Office.

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