

Improving Quality and Value in Health Care: Ideas from the Field

An introduction to an ad hoc solicitation

SUMMARY

Context

In 2009–2010, the nation's longstanding health care debate both clarified and highlighted some broad solutions to improving the health care system. There was general agreement that the cost of health care could not continue on its current trajectory. Policy-makers recognized that the nation faces significant health care quality and safety problems, and that health professionals and health care consumers need information about the cost and quality of care to be widely available so they can make sound decisions. There was also broad agreement that payers and patients should be paying for high-value care rather than high-volume care, and that more coordination and accountability in health care is essential.

The Solicitation

In April 2010, the Robert Wood Johnson Foundation (RWJF) issued a broad call for ideas from the field to rein in spending without jeopardizing patient care. This solicitation sought to promote learning and knowledge about innovative efforts that address health care quality and value problems in order to understand how these efforts may lead to better health care quality and lower costs in the following specific areas:

- Value-based purchasing
- Data collection and aggregation for performance measurement
- Quality improvement support
- Public reporting of provider performance

Although RWJF recognized that payment reform was and is critical if health care is to deliver sustainable high-value care, the Foundation did not entertain payment reform-oriented proposals in this solicitation because the RWJF staff anticipated developing a separate funding initiative to study payment reform efforts.

Projects could include short-term evaluations of local, state or federal policy changes or private sector innovations by employers, health plans, or others. They could also include research and policy analyses that demonstrated the likely effect of projects in the above areas.

RWJF was also interested in supporting public opinion research that provided quantitative and qualitative insights into what Americans think about these concepts, as well as other potential changes in the way health care is paid for in America (e.g., paying health care providers for quality of outcomes vs. the current practice of paying for quantity of services).

Results

RWJF received 277 proposals and, based on input from independent reviewers, selected 12 of the most novel ideas and those most likely to engender far-reaching change. These grants, totaling \$3.1 million, address issues in value-based purchasing, quality improvement support, public reporting of provider performance, and data collection and aggregation for performance measurement. The 12 grants awarded were for up to \$300,000 for up to three years. Preference was given to shorter projects.

These Program Results provide links to reports on the projects as they close; eventually, there will be reports on five projects.

Project List

- Devising Episode-of-Care Performance Measures for Select Illnesses (Grant ID# 68277, November 2013)
- Evaluating an Intervention to Reduce Unnecessary Medical Services (Grant ID# 68281, November 2012)
- Evaluating Ways to Profile Physicians Based on the Cost of Care They Provide (Grant ID# 68280, May 2013)
- How Physicians Perform: Building Empirical Evidence for Scoring and Classifying Physician Performance (Grant ID# 68275, September 2012)

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Solicitation ID # QE 3

Program area: Quality/Equality