



Hypertensive disorders Equitably Addressed with Remote Technology for Birthing People (HEART-BP) Info session

June 27, 2024

The Information Session will begin shortly...

➤ Information Session for HEART-BP program from 12-1pm

➤ **Today's Agenda:**

- Funding and Eligibility
- Application Requirements
- Review and Selection
- Timeline

➤ Please submit questions via the Chat or email HPC-HeartBP@mass.gov

- Types of questions
- Process for answering questions
- FAQ

- HEART-BP is a new \$1.5 million strategic investment in remote patient monitoring for hypertensive disorders of pregnancy (HDP). The HEART-BP program will fund awards of up to \$300,000 for five awardees.

- The program is intended to:
 - Support Eligible Entities in making high-quality, patient-centered RBPM programs available to appropriate patients for a minimum of 6 weeks postpartum.*
 - Improve access to care, experience of care, and outcomes for Birthing People experiencing HDP.
 - Ensure that Awardees address the presence of or potential for inequities in access, outcomes, and experience in all elements of the Program.
 - Reduce avoidable readmissions and ED visits associated with HDP to support both the clinical and the business case for RBPM.
 - Capture insights that can inform development of sustainable, scalable RBPM programs across the Commonwealth by collecting data on relevant processes, outcomes, experience, and avoided costs.

**Entities can propose programs that start earlier than delivery and/or extend beyond 6 weeks postpartum*



CORE PROGRAM COMPONENTS

- Provide durable medical equipment and technology for remote collection and electronic transfer of blood pressure readings from enrolled patients outside of the traditional care setting.
- Provide care coordination, patient education, and other support via telemedicine.
- Collect race, ethnicity, and language data that will allow the Eligible Entity to stratify Program metrics and identify and act on disparities.
- Engage patients – particularly patients experiencing disproportionate prevalence of HDP and/or risk of SMM in areas and populations – in Program design and improvement to ensure that the program is responsive to their needs and preferences.
- Offer patients culturally and linguistically appropriate education and training in management of HDP and in the appropriate use of RBPM tools and virtual communication technologies.

- HEART-BP will offer a total of \$1.5 million over two years, made up of five awards of up to \$300,000 each.
- Four (4) awards will be made from the Distressed Hospital Trust Fund (DHTF).
 - See Appendix A Exhibit 2 of the RFP package for a list of entities currently eligible for DHTF
- One (1) will be made from the Payment Reform Trust Fund (PRTF).
 - Any Massachusetts provider of ambulatory or inpatient obstetric services, or A licensed birth center
- Any MA birthing facility or hospital is welcome to apply for HEART-BP funding; however, there are more awards/funding available to DHTF-eligible providers.
- The HPC will determine eligibility.

- All awardees will report quarterly on a set of required quantitative measures that are expected to include*:
 - Demographic characteristics
 - E.g. Race, Ethnicity, Language
 - Process measures
 - E.g. Patient eligibility and enrollment, Blood pressure reports, Telemedicine visits
 - Outcome measures
 - E.g. Attendance at 6 week visit, Readmissions
- Awardees will be required to participate in or cooperate, as needed, with qualitative measurement activities led by the HPC or its state agency partners and/or contractors to evaluate the following:
 - Patient experience, as may be assessed through the completion of validated survey tools and/or focus groups or interviews with enrolled Birthing People
 - Staff/clinician experience via interviews and/or surveys

*Please see the RFP for a more comprehensive list of measures

Review and Selection: Proposals will be scored based on a total of 100 points, using the following selection criteria to evaluate each submission



➤ Proposed program (30 points)

- Clarity of program goals and potential impact on quality, cost, outcomes, and experience of eligible patients.
- Clarity and feasibility of proposed approach to meeting the Program requirements set out in the Funding Opportunity Description (Section III).
- Potential to generate insights about Program design decisions/features that influence care quality, cost, outcomes, and experience of eligible enrollees.

➤ Applicant (20 points)

- Geography and service area, including alignment with AHEM Communities (see Attachment A).
- Financial health and demonstrated need.
- Commitment of relevant leadership and staff to the program.

➤ Measurement and data collection (10 points)

- Feasibility of data collection processes, strength of data analytics capabilities, and sufficient allocation of staff time to collect and report required measures.

Review and Selection: Proposals will be scored based on a total of 100 points, using the following selection criteria to evaluate each submission



➤ Health equity (20 points)

- Populations experiencing disproportionate prevalence of HDP and/or risk of SMM in areas and populations, including Black non-Hispanic and Hispanic birthing people.
- Feasibility of plans to integrate REL data into program design, implementation, and quality improvement
- Approach to capturing and integrating input from patients – particularly patients experiencing disproportionate prevalence of HDP and/or risk of SMM in areas and populations – into Program design and implementation.
- Plans for addressing inequities related to language, technology access, and/or digital literacy.

➤ Budget (10 points)

- Adequacy and appropriateness of the budget to support proposed activities and goals of the proposed Program.
- Efficient use of financial resources.

➤ Sustainability and scalability (10 points)

- Applicant's approach to sustaining the Program beyond the Period of Performance, including but not limited to anticipated return on investment or impact on costs.

Anticipated Next Steps and Timeline



JUNE

- June 10: RFP issued
- June 27: Information session

AUGUST

- August 2: Deadline for submission of written questions (5pm)

SEPTEMBER

- September 6: Deadline for submission of proposal (5pm)

OCTOBER

- October 10: Awardees selected

DECEMBER

- December 31: Projected contract execution

JANUARY

- January 1: Period of performance begins (27-30 months, followed by up to 6 months of final evaluation activities)

Questions?



- Please submit questions and feedback through the webinar question submission feature, or to HPC-HeartBP@mass.gov.
- HPC Staff will provide responses to some questions received today during the webinar. We will also publish those questions and responses to the FAQ published to the RFP webpage on [COMMBUYS](#).
- Any questions we did not get to answer today during the webinar will also be added to the FAQ. The FAQ will be updated weekly through August 9th, 2024.
- A recording of this session will be posted to the HPC's webpage.