



**Illinois Department of Healthcare & Family Services
Healthcare Transformation Collaboratives (HTC)
Frequently Asked Questions (FAQs)**

PART II

As of March 19, 2021

1. How should collaborators include the Department's Comprehensive Medical Programs Quality Strategy in their transformation projects?

The Quality Strategy is designed to foster the delivery of the highest-quality, most cost-effective services possible by establishing a framework for ongoing assessment and the identification of potential opportunities for healthcare coordination and improvement. The HFS Quality Strategy framework prioritizes equity across all program goals as the aim for improvement efforts by analyzing data to strategically pinpoint improvement needs.

The framework includes five (5) pillars of improvement: Maternal and Child Health, Adult Behavioral Health, Child Behavioral Health, Equity, and Improving Community Placement. Within this framework, the Department has identified twelve (12) goals that fall within three (3) categories, Better Care, Healthy People/Healthy Communities, and Affordable Care.

Collaborations should focus on one or more of the baseline measures that fall within these three categories of the quality framework. Please see the [Comprehensive Medical Programs Quality Strategy](#) for more details.

Better Care

1. Improve population health.
2. Improve access to care.
3. Increase effective coordination of care.

Healthy People/Healthy Communities

4. Improve participation in preventive care and screenings.
5. Promote integration of behavioral and physical healthcare.
6. Create consumer-centric healthcare delivery system.
7. Identify and prioritize to reduce health disparities.
8. Implement evidence-based interventions to reduce disparities.
9. Invest in the development and use of health equity performance measures.
10. Incentivize the reeducation of health disparities and achievement of health equity.

Affordable Care

11. Transition to value- and outcome-based payment.
12. Deploy technology initiatives and provide incentives to increase adoption of electronic health records (EHRs) and streamline and enhance performance reporting, eligibility and enrollment procedures, pharmacy management, and data integration.

2. What are some examples of outcome measures that the Department may want to see proposals focus on?

Here are a few limited examples, however the Department will consider outcome focus measures that are specific to your proposal:

1. Follow-Up After High-Intensity Care for Substance Use Disorder (FUI) • 7-Day • 30-Day
2. Pharmacotherapy for Opioid Use Disorder (POD)
3. Mobile Crisis Response Services That Result in Hospitalization
4. Visits to the Emergency Department Visit for Behavioral Health Services That Result in Hospitalization
5. Overall Number and Length of Behavioral Health Hospitalizations
6. Number of Repeat Behavioral Health Hospitalizations
7. C-Section Rate for Low-Risk Women with No Prior Births
8. Well-Child Visits in the First 30 Months of Life (W30)
9. Child and Adolescent Well-Care Visits (WCV)
10. Annual Dental Visit (ADV)—Age Groups: 2–3 years, 4–6 years, 7–10 years, 11–14 years, 15–18 years, and 19–20 years
11. Childhood Immunization Status (CIS)— (Combo 10)
12. HIV Viral Load Suppression
13. LTSS Comprehensive Care Plan and Update
14. Successful Transition after Long-Term Care Stay
15. Breast Cancer Screening (BCS)
16. Cervical Cancer Screening (CCS)
17. Controlling High Blood Pressure (CBP)
18. Adults’ Access to Preventive/Ambulatory Health Services (AAP)
19. Reduce Preventable Hospital Admissions

3. Does HFS have any information per county on families, children with disabilities, race, seniors in nursing homes, dental care and so forth? If so, can you direct me to the right place? I know there are other data sources. I would like to know what HFS data would be available.

We prioritized the five most distressed communities in Illinois and analyzed data in those areas of the state (East St. Louis, South Cook, West Cook* and the South and West Sides of Chicago). More areas are being targeted for data analysis. We will be able to provide a data set that applicants can use to do an analysis. Please register on the HTC website to receive alerts for when this data is available.

4. Does HFS have data now that can be shared related to the rural communities? Number of lives? Health outcomes? I can find information on claims denials, processes and so forth but no health outcomes data.

See answer to question 3 above.

5. Does this funding opportunity require applicants to include hospitals in their applications?

Not necessarily. There is an opportunity for cross provider collaborations and collaborations that are led by minority enterprises. However, the legislation prioritizes hospitals, including safety net and critical access hospitals, for transformation funding.

6. Components of proposed projects may require legal entity formation or contractual arrangements between applicants. Upon receipt of funding, the applicants will seek both legal and consulting support. Is legal funding part of the consulting funding that would be made available?

The healthcare consulting firms that the Department engages may be able to provide assistance with identifying models of new entities or governing structures, however it is not the Department's intent to provide legal services to collaborations.

7. How will subcontractors be handled? In other words, if a larger organization is awarded a larger grant, how will that organization contract with hospitals and other partners?

Subcontractor relationships/agreements shall be proposed by the collaborations. The Department is asking all proposers to describe relationship agreements as a part of the application process, and it will be reviewed by the Department.

8. Are there timeline expectations in terms of capital funding? The webinar on Friday mentioned a 5-year span, we are wondering if this applies to the entire program including capital, or only programmatic requests?

Yes, the timeline applies to the entire program, including capital funding.

Please remember to periodically visit the Healthcare Transformation Collaboratives [webpage](#) for more details and to register for updates on the Healthcare Transformation Collaboratives Program.