Below please find TA available for the Alliances in this upcoming TA Cycle; September 1, 2012 to August 30, 2013. For your convenience, reiterated below are the changes to the list of the TA providers that have already been communicated.

We encourage you to discuss the TA offerings with your team prior to completing this survey.

The survey is organized by AF4Q priority area. The priority area and TA providers are listed below:

Priority Areas

Patient Experience: Shaller Consulting (Dale Shaller),

Consumer Engagement: American Institutes for Research (AIR), Institute for Patient and Family-Centered Care (IPFCC)

Quality Improvement: American Board of Medical Specialites/Improving Performance in Practice (ABMS/IPIP), MacColl

Equity: Center for Health Care Strategies (CHCS), Finding Answers, National Program Office (NPO)

Cost/Efficiency and Payment Reform: Network for Regional Healthcare Improvement (NRHI -Harold Miller and Jay Want), Health Care Incentives Improvement Institute (HCi3 -Francois deBrantes), Bailit Health Purchasing (Michael Bailit)

This survey will help us identify which TA you are interested in for the upcoming year. We realize that this may change over the year, however, please respond to the best of your ability.

If you have questions, please do not hesitate to contact Katherine Brown at kobrowne@gwu.edu.

*1. Alliance Name

Patient Experience

Maybe

Other (please specify)

The following questions ask if you would like to receive TA in the domain of patient experience.

*2. I would like to receive TA from Shaller Consulting, related to CG-CAHPS data collection and reporting. This includes strategic assistance to: build the case for implementing a uniform approach to data collection; assessing current survey practices; planning and implementing survey administration and analysis; and/or developing strategies to sustain these efforts.

O Yes, right away
O Yes, later this year
O No

*3. I would like to receive TA from Shaller Consulting specific to patient experience improvement. I would like to receive TA from Shaller Consulting specific to patient experience improvement. This includes assistance in planning and implementing quality improvement activities (e.g., providing case studies, speaker suggestions, strategic support for work group activities; planning learning summits; strategic consultation to staff).

Yes, right away
Yes, later this year
No
Maybe
Other (please specify)

Consumer Engagement

The following questions ask if you would like to receive TA in the domain of consumer engagement.
I. I would like to receive TA from the American Institutes for Research (AIR) for supporting employers to engage employees. This TA includes strategic consultation to Alliances to nelp employers: educate employees to make informed decisions about accessing appropriate and high-quality, high-value care; implement purchasing strategies to neentivize employees to obtain high-value care; become more informed and engaged in Alliance efforts regarding health care quality and cost.
C Yes, right away
C Yes, later this year
C No
C Maybe
Other (please specify)
*5. I would like to receive TA from the American Institutes for Research (AIR) related to consumer-friendly cost and resource use information. This includes strategic consultation
consumer-friendly cost and resource use information. This includes strategic consultation to: develop consumer-friendly public reporting of cost and resource use; identify and address barriers to consumer use of this information; and support implementation of
consumer-friendly cost and resource use information. This includes strategic consultation to: develop consumer-friendly public reporting of cost and resource use; identify and address barriers to consumer use of this information; and support implementation of strategies to to help consumers use the information in their decision-making.
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supporting consumer engagement to achieve quality and cost goals (e.g., reducing readmissions). This includes strategic consultation for integrating consumer engagement approaches into an Alliance's strategy for achieving a given quality or cost goal. Yes, fight away Yes, later this year No Other (please specify) *7. I would like to receive TA from the Institute for Patient- and Family-Centered Care (IPFCC). This TA could include strategic consultation to plan and implement a model of patient engagement in quality improvement (e.g., integrating patients into quality improvement teams; establishing a practice-based patient advisory council), and/or to otherwise implement evidence-based components of patient- and family-centered care. Yes, right away Yes, later this year No Maybe Other (please specify)	*6. I would like to receive TA from t	he American Institutes for Research (AIR) for
approaches into an Alliance's strategy for achieving a given quality or cost goal. Yes, right away Yes, later this year No Maybe Other (please specify) *7. I would like to receive TA from the Institute for Patient- and Family-Centered Care (IPFCC). This TA could include strategic consultation to plan and implement a model of patient engagement in quality improvement (e.g., integrating patients into quality improvement teams; establishing a practice-based patient advisory council), and/or to otherwise implement evidence-based components of patient- and family-centered care. Yes, right away Yes, later this year No Maybe	supporting consumer engagement to	o achieve quality and cost goals (e.g., reducing
C Yes, right away C Yes, later this year C No C Maybe Other (please specify) *7. I would like to receive TA from the Institute for Patient- and Family-Centered Care (IPFCC). This TA could include strategic consultation to plan and implement a model of patient engagement in quality improvement (e.g., integrating patients into quality improvement teams; establishing a practice-based patient advisory council), and/or to otherwise implement evidence-based components of patient- and family-centered care. C Yes, right away C Yes, later this year C No C Maybe	readmissions). This includes strateg	ic consultation for integrating consumer engagement
C Yes, later this year C No C Maybe Other (please specify) *7. I would like to receive TA from the Institute for Patient- and Family-Centered Care (IPFCC). This TA could include strategic consultation to plan and implement a model of patient engagement in quality improvement (e.g., integrating patients into quality improvement teams; establishing a practice-based patient advisory council), and/or to otherwise implement evidence-based components of patient- and family-centered care. C Yes, right away C Yes, later this year C No C Maybe	approaches into an Alliance's strate	gy for achieving a given quality or cost goal.
Other (please specify) *7. I would like to receive TA from the Institute for Patient- and Family-Centered Care (IPFCC). This TA could include strategic consultation to plan and implement a model of patient engagement in quality improvement (e.g., integrating patients into quality improvement teams; establishing a practice-based patient advisory council), and/or to otherwise implement evidence-based components of patient- and family-centered care. Output Yes, right away Yes, later this year Maybe	C Yes, right away	
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Yes, later this year No Maybe	improvement teams; establishing a p	practice-based patient advisory council), and/or to
C No Maybe	C Yes, right away	
C Maybe	O Yes, later this year	
	O No	
Other (please specify)	C Maybe	
	Other (please specify)	

Quality Improvement
The following questions ask if you would like to receive TA in the Quality Improvement domain.
*8. I would like to receive TA from the American Board of Medical Specialties/Improving Performance in Practice (ABMS/IPIP) for in-depth strategic planning.
C Yes, right away
C Yes, later this year
C No
○ Maybe
Other (please specify)
*9. I would like to receive TA from the American Board of Medical Specialties/Improving
Performance in Practice (ABMS/IPIP) for maintenance of certification.
C Yes, right away
O Yes, later this year
O No
C Maybe
Other (please specify)
¥40 1 11 11 1
*10. I would like to receive TA from the American Board of Medical Specialties/Improving Performance in Practice (ABMS/IPIP) for the QI Leadership Training Program. This cohort
will focus on sustainability and spread.
○ Yes, right way
C Yes, later this year
O No
C Maybe
Other (please specify)

*11. I would like to receive TA from the MacColl Institute. This TA includes: limited expert consultation to QI leaders; facilitation of sponsored QI meetings and events; assistance	
with practice transformation strategies to support patient-centered medical homes;	
strategic planning around incorporating patients/consumers into QI activities, and;	
evaluating QI projects.	
○ Yes, right away	
C Yes, later this year	
O No	
C Maybe	
Other (please specify)	
*12. I would like to receive TA from the Centers for Health Care Strategies (CHCS) in identifying and leveraging new opportunities coming out of CMS. This includes strategic advice on how to communicate your value to Medicaid leadership; strategic advice on how to leverage emerging Medicaid efforts; development of presentations, webinars, and other tools.	
C Yes, right away	
C Yes, later this year	
C No	
O Maybe	
Other (please specify)	

Equity
The following questions ask if you would like to receive TA in the equity domain. As noted in the RFP for Phase 4, the definition of equity can be broadened past race, ethnicity, and language.
≭13. I would like to participate in the second phase of the Equity Improvement Initiative,
working with CHCS and Finding Answers. This includes support to design, implement and
assess the impact of practice-level disparities interventions, including webinars,
facilitation of peer-to-peer exchange, and onsite meetings.
C Yes, right way
C Yes, later this year
O No
O Maybe
Other (please specify)

Cost/Efficiency and Payment Reform

The following questions ask if you would like to receive TA from the cost/efficiency and payment reform domain.

*14. I would like to receive TA from NRHI (Harold Miller and Jay Want). This TA includes: identifying and developing strategies for reducing costs without rationing; development/refinement of payment reform strategy; education about cost drivers and payment reform models; consensus-building on desired payment reforms and on strategies for implementing them; identifying the best opportunities for targeting payment reform and developing the business case for care improvements; and designing and implementing identified payment changes.

0	Yes, right away
0	Yes, later this year
0	No
0	Maybe
Othe	er (please specify)

*15. I would like to receive TA from HCi3 (Francois deBrantes). This TA includes: data analysis using the PROMETHEUS evidence informed case rate (ECR) analytics; designing payment incentive programs to appropriately shift the management of financial risk from payers/purchasers to providers; and support the implementation of payment reform efforts focused on P4P and episode care of payment.

0	Yes, right away
0	Yes, later this year
0	No
0	Maybe
Othe	er (please specify)

*16. I would like to receive TA from Michael Bailit. This TA includes: value based purchasing techniques including value based payment strategies, design and implementation of payment models for multi-payer collaborative medical homes programs, design and implementation of shared savings methods for collaborative medical home programs, broad strategy development, design and implementation of payment models for bundled payment models, and advice and process facilitation to achieve group consensus.
○ Yes, right away
C Yes, later this year
O No
Other (please specify)