

VAi2: New Models of Dialysis and Renal Disease Treatment



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- New Models of Dialysis and Renal Disease Treatment

Polytrauma

• Questions & Answers

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"We identify, fund, and test new ideas from VA employees, academia, and the private sector. Our focus is on improving access, quality, performance, and cost. At the end of the day, progress in these areas greatly enhances the VA's ability to serve Veterans in the 21st Century."

- VAi2 gives Veterans Affairs a structured way to identify, fund, and test creative new solutions that advance the services we provide
- The Industry Innovation Competition is your invitation to participate in the process
- We've identified 6 key areas that are opportunities for significant advancement
- We ask for your best ideas on making significant improvements in these 6 areas
- Proposals should provide a clear benefit that can be demonstrated via prototype or field test within about 1 year

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Broad Agency Announcement Process









- Issued under FAR 35.016 and 6.102(d)(2)(i)
- Does not commit the Government to make an award or pay proposal preparation costs
- Open until September 30, 2010

- Government available to commence evaluations beginning July 6, 2010
- Proposals must be valid for at least 90 days
- Proposals will be evaluated on their own merit according to the criteria stated in the BAA, not against other proposals

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Broad Agency Announcement Process









<u>Proposal Preparation Instructions</u>

- Quality is more important than quantity of information
 - Technical volume is limited to 50 pages
 - Charts, diagrams and similar representations count towards the page limit
 - Hyperlinks are not allowed

Instructions, Continued:

- Firm Fixed Price (FFP) contracts preferred
- Offerors must be registered in the Central Contractor Registry (CCR)
- Proposals must be submitted electronically to vai2baa@va.gov

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"Dialysis treatments are necessary to support people with acute or end stage kidney disease. For many of the over 10,000 Veterans with ESKD treated each year these treatments involve inconvenient and costly travel to a hospital or treatment facility."

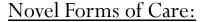
- Dialysis treatment is provided to over 10,000 eligible Veterans with end stage kidney disease (ESKD) and VA estimates at least 3,200 Veterans reach ESKD per year.
- Treatment is provided at either VA hospitals or community-based vendors under a fee or contract basis.
- Both the number of Veterans receiving treatment and the cost of care (particularly contracted care) are increasing every year.
- Increasing VA's ability to cost-effectively provide homebased dialysis treatments could greatly improve this situation for Veterans.

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Dialysis: Forms of Care



VA is interested in new means of preventing ESKD or supporting Veterans with ESKD, particularly in rural areas. Examples of such care include:

- Facilitated home dialysis services
- Remote monitoring/videoconferencing for home dialysis patient support
- Portable or wearable dialysis
- Mobile dialysis services
- Improved dialysis technology: ergonomic and usability design (particularly for home)









Forms of Care, continued:

- Improved electronic reporting of dialysis care
- Optimizing process and workflow design in center-based VA dialysis facilities
- Alternative models of patient centered health services delivery to veterans
- Facilitated communication technologies
- Optimizing access to kidney transplantation
- Preventive care of veterans at risk
- Expanded joint ventures with other federal agencies to provide renal support services
- Patient education initiatives regarding treatment of kidney disease

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Home Monitored Dialysis Care:

- Improved remote monitoring including realtime two-way communication between patients, dialysis equipment, and members of the care team.
- Integration of wireless mobile devices

Mobile Dialysis Care:

- Innovative approaches to allow delivery of dialysis services to Veterans in their homes.
- Technology employed must be capable of providing state-of-the-art dialysis and storing information in the VA electronic medical record.









Enhanced Disease Management:

- Novel strategies to identify Veterans at high risk of kidney failure.
- Solutions that provide a capability to ID these Veterans, reach out to them, maintain "capture," and eliminate "loss to follow up."

Enhanced Care Coordination:

- Improved health services models for Veterans receiving dual care (both contracted and within VA settings).
- Proposed models would exemplify seamless, patient-centered health care for veterans.

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Dialysis: Applications

<u>Alternative Models for Delivery:</u>

- VA seeks proposals examining cost effectiveness of alternative models of the delivery.
- Examples include tools to evaluate cost effectiveness of various staffing models for implementing alternative dialysis programs.

<u>Ventures with other Federal Agencies:</u>

• VA seeks models of care which demonstrate feasibility, cost effectiveness, and patient satisfaction with dialysis care delivered by cooperative effort of federal agencies.









<u>Software Innovation for EMR Integration:</u>

- VA seeks to automatically download dialysis data into the EMR for national and local quality improvement purposes and enhanced medical documentation.
- Should address reporting of data from multiple locations including labs, notes, etc.

Wearable Dialysis Devices:

- VA seeks proposals to test utility and feasibility of employing wearable dialysis devices.
- Quality of care and patient acceptability are requisite measures.

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Dialysis: Applications

Clinical Information Sharing:

- VA is seeking proposals that allow staff to communicate sensitive patient care information in a secure environment.
- These tools could provide for both urgent and routine communications of information not usually included in the medical record and should fit into regular workflows.

Chronic Kidney Care Workflow:

• Embedding, rather than overlaying, of guidelines and tool kits is critical to usefulness of CPGs and their associated tool kits.









Patient-Centered Medical Home:

- VA seeks proposals exploring models of patient centered medical homes (PCMH) for those with CKD and ESKD.
- Broad outcomes would include measures of coordination of care, patient satisfaction, delivery of care, morbidity and mortality.

Patient-Centered Decision Making:

- VA seeks to achieve greater satisfaction with care by involving patients as central to decisions regarding CKD and ESKD care.
- Proposals from specific tools to entire clinical systems are welcome.

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Patient Education:

- VA seeks proposals that would allow patients to more fully participate in their care, working toward a more patient-centered approach.
- Proposals could include: tailored measures to slow down progression of kidney disease, nutritional information tailored to fit the patient's profile, dialysis options, transplantation options, and shared decision making about dialysis initiation and discontinuation decisions, and efforts to evaluate and improve the quality of end-of-life and palliative care for veterans receiving dialysis.









Current Operations:

VA currently provides many services for patients with ESRD. Based on the needs of the patient and local availability these can include:

- Home Health Services
- Patient Education
- Medication Management
- Nutritional Services
- Care Coordination
- Transportation Services
- Physical Therapy/Rehabilitation Services
- Vascular Access Placement
- Kidney Transplants

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Questions and Answers









Answers to questions will be posted at www.fedbizopps.com

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