



REQUEST FOR PROPOSALS

PROJECT: NEA Eczema Digital Health Platform Business Plan
COMPANY: National Eczema Association (NEA)
ADDRESS: 4460 Redwood Highway, Suite 16D San Rafael, CA 94903
CONTACT: Julie Block, President & CEO
EMAIL: julie@nationaleczema.org

1. Background/Introduction

NEA is a national patient advocacy non-profit organization dedicated to improving the health and quality of life for those affected by eczema. To serve the patient community, NEA has created a desktop and mobile-optimized web-based **Eczema Platform** that allows chronic disease patients to track their disease symptoms and triggers and related quality of life metrics by way of a “health dashboard”, and share this information with their healthcare professionals to focus health care discussions and ideally improve health outcomes (shared decision making). Collectively, the Eczema Platform has been designed to advance patient knowledge and engagement in their eczema management while simultaneously collecting patient-provided data to support eczema research advances using real-world information.

Attached to this RFP is the Eczema Platform Program Overview. The Eczema Platform was initially developed and owned by Health Advocacy Partners (HAP), with development supported by a NEA grant from Pfizer. It is now wholly owned by NEA. Additional background will be provided to the RFP recipient.

The Eczema Platform is currently in the development stage and has yet to be launched. At this time, NEA seeks a consultant to develop a 3-year business plan that is integrated with the organization’s overall goals and objectives.

2. Project Goals and Scope of Services

Consultant will provide a detailed roadmap for implementation and continued function of all aspects of the Eczema Platform program. This will be developed in consultation with NEA staff and expert landscape assessment research.

The business plan will include the following:

- Eczema Platform Statement of Purpose & Impact/Meaningful Outcomes and Metrics
- Integration with NEA strategic plan
- SWOT Landscape Assessment/Best Practices
- Evaluation of Platform Technology – current and future opportunities and risks
- Platform growth opportunities and limitations. Near and long-term financial strategy including resources/budget required to launch, maintain and maximize benefits
- Revenue and Fundraising Potential
- Data Governance Plan and Related Regulatory Compliances
- Staffing and operations program management structure
- Marketing & Communications Plan Highlights
- Timelines

3. Elements of Proposal

Proposals will include:

- a) A profile of the consultant or consulting team who will work on the project. List names and titles, as well as experience as it specifically relates to aspects of this project.
- b) Samples of deliverables created by the consultant/team for similar projects.
- c) A letter outlining the consultant/team's proposed services and approach to the project, including a general timeline and key activities that will lead to the completion of project deliverables.
- d) A detailed description of expected project fees and related expenses.
- e) References for whom the consultant has performed similar work in the past 3-5 years, including email and phone contact information.
- f) Any supplemental information that will help the selection panel understand the consultant/team's approach, previous outcomes, or expected deliverables.

4. Timeline

RFP Release:	November 25, 2018
Proposals due (via email):	December 24, 2018 (by 5:00 pm PST)
Final Selection & Notification:	Week of January 14, 2019
Business Plan Delivery Date:	April 15, 2019

NEA's Eczema Digital Health Platform Program Overview

Shared Decision Making (SDM)

Framework: A process through which the clinician and patient engage in a dialogue to reach health-related decisions that reflect the best available evidence as well as patient preferences and values.

Evidence-based patient tools support SDM process

- Self-efficacy resources
- Pre-appointment preparation
- Decision aids

Why Shared Decision Making in Eczema/Atopic Dermatitis (AD)?

Patient-Reported Care Gaps:

- Patients are not satisfied with their treatment
- Patients are overwhelmingly not satisfied with their AD care
- Chronic disease patients often make decisions between many complex medications with incomplete knowledge of both risks and benefits of each therapy
- Chronic disease patients are dissatisfied with explanations of their condition and information they received during consultations
- Discussions of the patient's condition occurred in less than 25% of consultations

Barriers to Shared Decision Making Adoption

Known Patient Barriers:

- Lack of engagement or activation
- Lack tools or resource to participate in SDM
- Hesitation around how/when to engage in SDM

Known Physician Barriers:

- Lack awareness and/or access to existing tools
- Lack time and resources
- Lack skills and training in Shared Decision Making
- Operational challenges of implementing into clinical workflows

Why NEA Shared Decision-Making tools within a broader Digital Health Platform?

What engages patients?

- Patient education in all forms
- Shared decision making
- Digital tools

What do patients want/need?

- Overwhelmingly in favor of a broader health platform
- In addition to access to SDM tools, patients wanted to track
 - Eczema treatments

- Itch
- Triggers
- Flare location, duration and appearance
- Stress

Platform Objectives:

- Activate patients with moderate to severe atopic dermatitis
- Collect real-world patient-generated data to address gaps in understanding of disease

NEA Digital Health Platform

Components:

- Patient Self-Efficacy Tools
 - Trackers
 - Patient education (customized to patient-specific issues via simple algorithm)
 - Overview/trends view of inputs (daily actions or occurrences) and outputs (symptoms)
 - Between-visit use results in patients “taking charge” of their disease
- Provider-Prep Module (Shared Decision-Making tools)
 - Provider Prep reports
 - Provides providers concrete information on daily actions/occurrences, which may affect symptoms
 - Pre-populated decision aids
 - Alerts provider to reason for the appointment via AHRQ (Agency for Healthcare Research and Quality)
 - Pre-packaged data sent to provider prior to appointment
 - Makes provider use of clinic time more efficient

Patient-Generated Health Data

On the back-end of NEA’s Health Platform, NEA will be equipped to collect patient-generated health data, not just as a care intervention, but also to provide a longitudinal view of atopic dermatitis symptoms, atopic dermatitis and triggers, and the impact of interventions on patient reported health outcomes. At this time NEA will be collecting the following:

- Trackers:
 - Flares/skin involvement
 - Itch intensity
 - Pain levels
 - Irritants/environmental allergen exposure
 - Stress
 - Consumption of highly allergic foods
 - Treatment regimen tracked by date/time
 - Demographics
 - Disease type
 - Comorbidities
- Shared Decision Making:

- Patient values
- Treatment interest/preference
- PO-Scorad scores
- Reason for appointment
- Insurance Center:
 - Denials by treatment
 - Step therapy by treatment
 - Drug tiering
 - Network narrowing
 - Prior authorization by treatment
- Legal & Ethical
 - HIPPA/HITECH compliant
 - “Informed consent” =acceptance of terms & conditions
 - Easy opt-out
 - Aggregate data only