

5a. DP18-1815 Category B: Resource Use and Cost Inventory Tool

Form Approved
OMB No. 0920-xxxx
Exp. Date XX/XX/20XX

Introduction

Thank you for taking the time to participate in this Cost Study of the 1815 Category B strategies. Please follow the instructions provided in this Resource Use and Cost Inventory Tool to provide cost data related to the implementation of the 1815 Category B strategies. The data collected with this tool will be used to (1) estimate the overall costs of implementing each Category B strategy, (2) determine the level of variability in the cost of implementation from one state to another, and (3) identifying the factors driving cost and variability.

Completion of this Resource Use and Cost Inventory Tool is voluntary. It is expected that it will take you approximately **2.5 hours** to complete the tool, including time to retrieve information you may need to fill the form. You may save a partially completed tool and return to complete it at a different time. All information will be kept secure and any identifiable information will be removed when results are aggregated for analysis.

The Deloitte National Evaluation Team is available to address any questions you may have and provide additional guidance to support completion of this tool. You may email **Gizelle Gopez**, ggopez@deloitte.com with questions.

5a. DP18-1815 Category B: Resource Use and Cost Inventory Tool

Introduction to Cost Study

*Thank you for taking the time to participate in the DP18-1815 Resource Use and Cost Inventory Tool. The Deloitte evaluation team is working with the CDC Division for Heart Disease and Stroke prevention to evaluate the DP18-1815 Cooperative Agreement -- Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke, which we will refer to as 1815. As part of the larger national evaluation of 1815, we are conducting a cost study focused on the Heart Disease and Stroke, Category B strategies. The cost study is designed to calculate the overall costs of implementing each 1815 Category B strategy and will take approximately **2 hours** to fill out.*

*Your participation in this cost study is completely voluntary and it will not in any way impact the funding or technical assistance you receive from CDC. All information will be kept secure and any personally-identifiable information will be removed when results are aggregated for analysis. If you have any questions about the study or the tool, please contact **Gizelle Gopez, ggopez@deloitte.com**.*

Note: Public reporting burden of this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: DRA (0920 204D).

Instructions

Each of the corresponding worksheets have their own specific instructions. Note that boxes shaded in **yellow** do not need to be filled out by the respondent as these cells will automatically populate as a result of the excel formula within these cells. The information that will be asked of you to fill out the information will require some detail. Therefore, to fill out the corresponding spreadsheets, please have the following information readily available for the respective reporting period:

- 1) CDC budget
- 2) Workplans
- 3) APRs

DP18-1815 Category B Strategies

Below are the Category B strategies which are referenced throughout the tool by strategy number and by shorthand description. You may refer back to this page for a full description of each of the strategies.

B1: Promote the adoption and use of electronic health records (EHR) and health information technology (HIT) to improve provider outcomes and patient health outcomes related to identification of individuals with undiagnosed hypertension and management of adults with hypertension.

B2: Promote the adoption of evidence-based quality measurement at the provider level (e.g., use dashboard measures) to monitor healthcare disparities and implement activities to eliminate healthcare disparities)

B3: Support engagement of non-physician team members (e.g., nurses, nurse practitioners, pharmacists, nutritionists, physical therapists, social workers) in hypertension and cholesterol management in clinical settings

B4: Promote the adoption of MTM between pharmacists and physicians for the purpose of managing high blood pressure, high blood cholesterol, and lifestyle modification

B5: Develop a statewide infrastructure to promote sustainability for CHWs to promote management of hypertension and high blood cholesterol

B6: Facilitate use of self-measured blood pressure monitoring (SMBP) with clinical support among adults with hypertension

B7: Implement systems to facilitate systematic referral of adults with hypertension and/or high blood cholesterol to community programs/resources



**Please review all information completed with the individual to make sure it is accurate
before departing**

DP18-1815 Category B: Resource Use and Cost Invest

Resource Tot

Instructions: This page has been pre-populated. There is no need to fill out any be populated due to the Excel formula within each cell.

State

Reporting Period

Total 1815 Category B Spending Amount

Tabs	Cost Study Component
1	Parameters
2	Personnel
3	Consultants and Subcontractors
4	Equipment, Supplies, Materials

5	Travel
6	Other Resources

Inventory Tool

als

of the information listed here. Items in **yellow** will automatically

Total	
	N/A
\$	-
\$	-
\$	-

\$	-
	N/A



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DP18-1815 Category B: Resource Use and Cost Inv

Instructions: Please select which of the strategies your health department is in the following: **Development:** strategy is under the design phase (0% mature); **Start-up:** increasing number of sites, participation from target audience (50% mature); **End:** **Maintenance:** continuation of strategy under 1815 perhaps under another NOI. Use the following Excel formula within each cell.

State

Reporting Period

Total 1815 Category B Funding Amount

Is the SHD implementing this strategy?	
B.1	Promote the adoption and use of electronic health records (EHR) and health information technology (HIT) to improve provider outcomes and patient health outcomes related to identification of individuals with undiagnosed hypertension and management of adults with hypertension
B.2	Promote the adoption of evidence-based quality measurement at the provider level (e.g. use dashboard measures) to monitor healthcare disparities and implement activities to eliminate healthcare disparities
B.3	Support engagement of non-physician team members (e.g., nurses, nurse practitioners, pharmacists, nutritionists, physical therapists, social workers) in hypertension and cholesterol management in clinical settings
B.4	Promote the adoption of MTM between pharmacists and physicians for the purpose of managing high blood pressure, high blood cholesterol, and lifestyle modification

B.5	Develop a statewide infrastructure to promote sustainability for CHWs to promote management of hypertension and high blood cholesterol
B.6	Facilitate use of self-measured blood pressure monitoring (SMBP) with clinical support among adults with hypertension
B.7	Implement systems to facilitate systematic referral of adults with hypertension and/or high blood cholesterol to community programs/resources

Inventory Tool

Parameters

Implementing (column D). For level of maturity (column E), please select the level of maturity:
up: initiation of strategy for the first time under the 1815 NOFO (25% mature)
xpansion: strategy has not only gained traction but has now expanded to de
FO or initiative, activities are established (100% mature). Items in **yellow** will

(Yes/No) (Dropdown)	Level of Maturity of Strategy (Dropdown)



level of maturity which is defined as
); **Growth:** strategy is gaining traction,
desired size and reach (75% mature);
l automatically be populated due to the

TOTAL	N/A	\$ -

		\$ -	
		\$ -	
		\$ -	
		\$ -	
		\$ -	
\$ -		\$ -	N/A

N/A	N/A	N/A	N/A

N/A						

TOTAL	N/A

N/A	N/A	\$ -	\$ -

\$0.00					
\$0.00					
\$0.00					
\$0.00					
\$0.00					
\$0.00					

TOTAL	N/A



Table 2. Strategy Specific Supplies/Materials

Please update the table below for strategy-specific supplies/materials

Strategy	Materials/Supplies
Strategy B.1	Printing costs
Strategy B.1	Training cost - venue rental
Strategy B.1	Website maintenance costs
Strategy B.1	
Strategy B.2	Printing costs
Strategy B.2	Paper
Strategy B.2	
Strategy B.2	
Strategy B.3	Communication/informational materials about TBC
Strategy B.3	Printing costs
Strategy B.3	
Strategy B.3	
Strategy B.4	Communication/informational materials about MTM
Strategy B.4	Printing costs
Strategy B.4	
Strategy B.4	
Strategy B.5	Communication/informational materials about CHW
Strategy B.5	CHW training materials -printing cost
Strategy B.5	Training cost- venue rental
Strategy B.5	
Strategy B.6	Communication/informational materials about SMBP
Strategy B.6	Printing costs
Strategy B.6	Self-monitoring equipment
Strategy B.6	
Strategy B.7	
Strategy B.7	
Strategy B.7	
Strategy B.7	

TOTAL	N/A

		\$ -
N/A	N/A	\$ -

eneral
additional
the second
osts, paper,
needed. Note
mula within

hart below with the office equipment purchase for 1815.

, paper, folders, website maintenance costs, etc. Sample supplies have been inputted bel

ow only as examples. Please adjust the cells within table 2 as needed.

TOTAL	N/A	N/A
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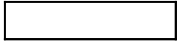
N/A	N/A	
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\$	-	N/A	N/A	N/A	\$	-
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N/A	\$ -	N/A	N/A	\$ -	N/A	N/A
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\$ -	N/A	\$ -	N/A	\$ -	\$ -
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heart-disease prevention programs as in-kind funding

B.6	B.7
SMBP	Referrals