

# University-State Partnerships: Building Policy from Evidence

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# Study Aims

- To describe and understand variations in current university-state partnerships across the United States
- To help researchers and policymakers building such partnerships move forward
  - Best practices
  - Means of refining, smoothing collaboration over time
  - Forums for networking and coalition

# University-State Partnership Inclusion Criteria

We defined a partnership as a formal, self-identified, ongoing collaboration between a state's health agencies (e.g. Medicaid) and an in-state public university.

Single university-state projects did not constitute an ongoing partnership.

Master contract was not necessary for inclusion.

# Methods

## Interviews with Directors/Leaders of the University Center

Origins and Collaborators

Organizational Contracts and Data Arrangements

Collaboration Activities and Products

Funding Sources

Influence on Policy

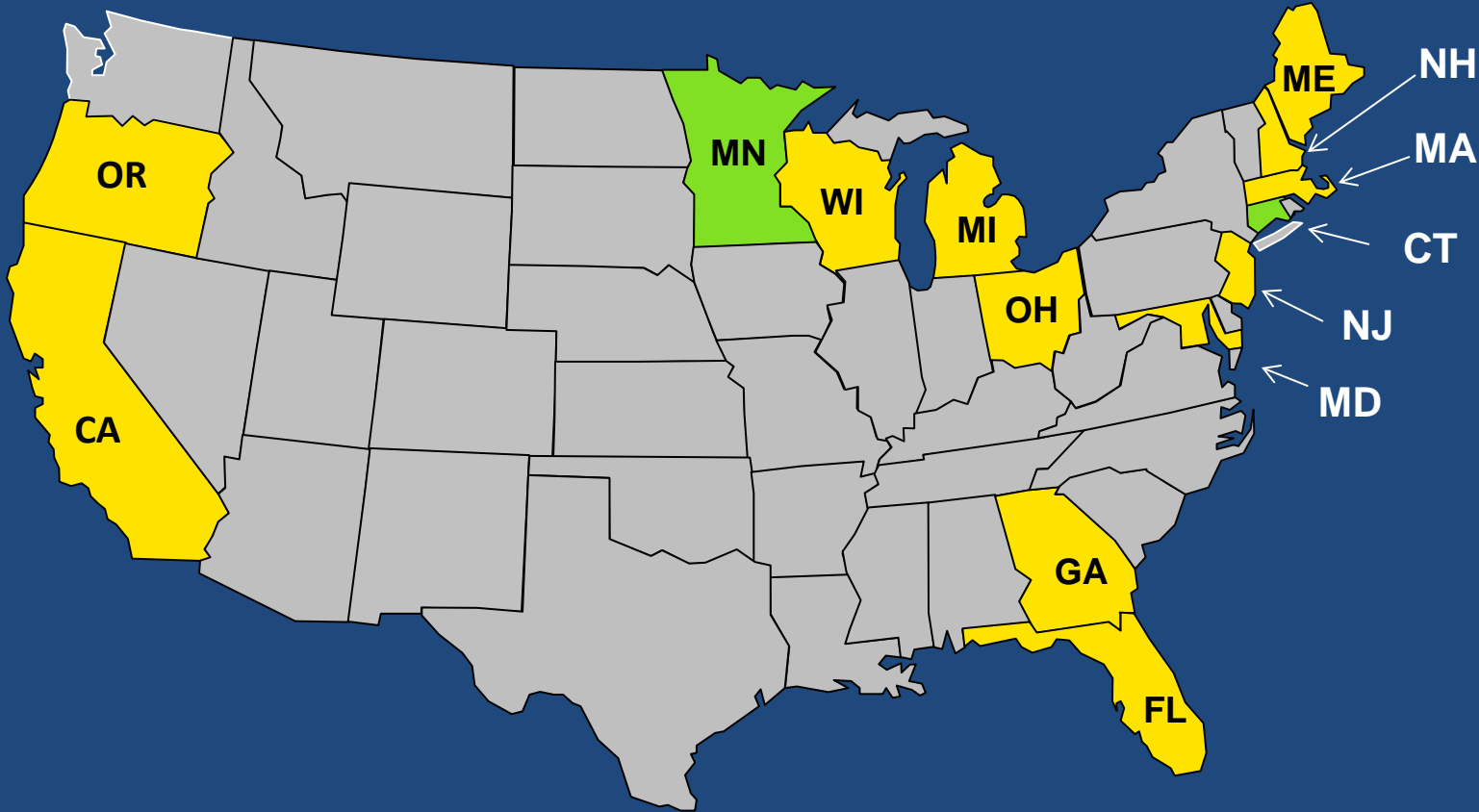
Influence of Policy on Partnerships: ACA

## Follow-Up Surveys to Clarify, Expand on Key Points

### “Snowball” outreach

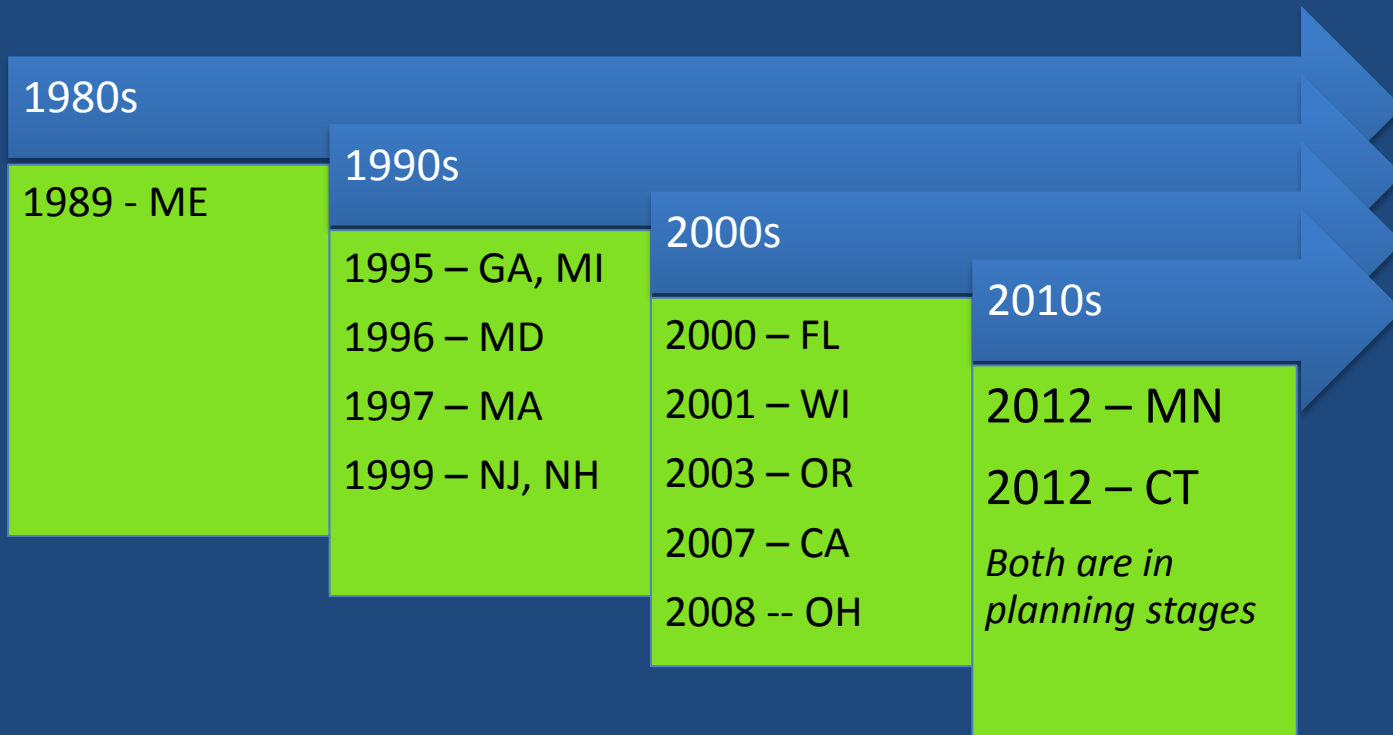
- Personal knowledge, colleague correspondence
- Academy Health Research Meeting – Orlando, June 2012
- NASHP Annual Conference – Baltimore, October 2012

# University–State Partnerships Interviewed



- Established Partnership: 12 States
- Planning Partnership: MN, CT
- Multi-Campus Partnership: CA, OH, CT

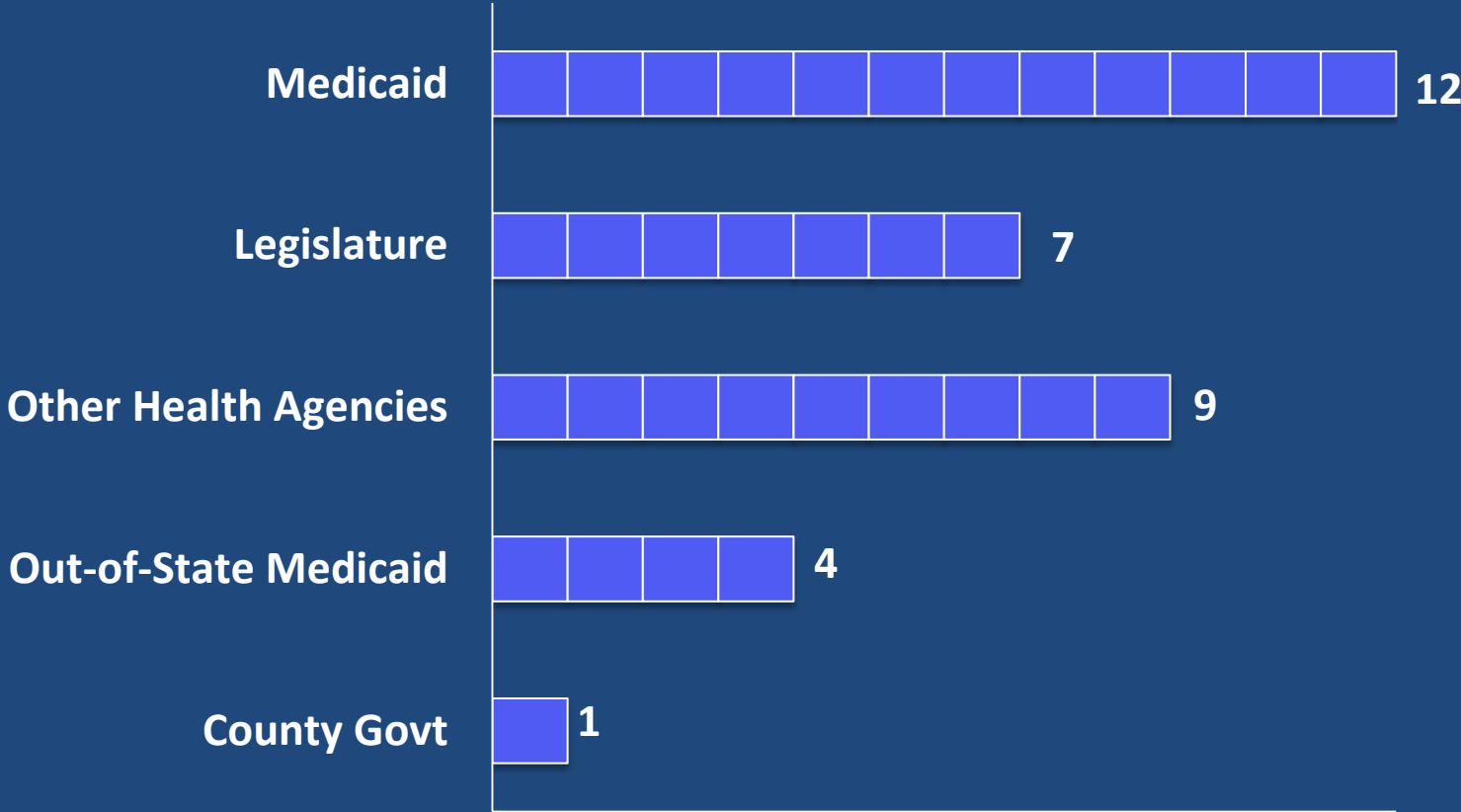
# University-State Partnerships -- Year Established --



5 of the 12 partnerships reported a state policymaker moving to academic position as impetus for partnership

# Medicaid is Not Always the Sole Partner

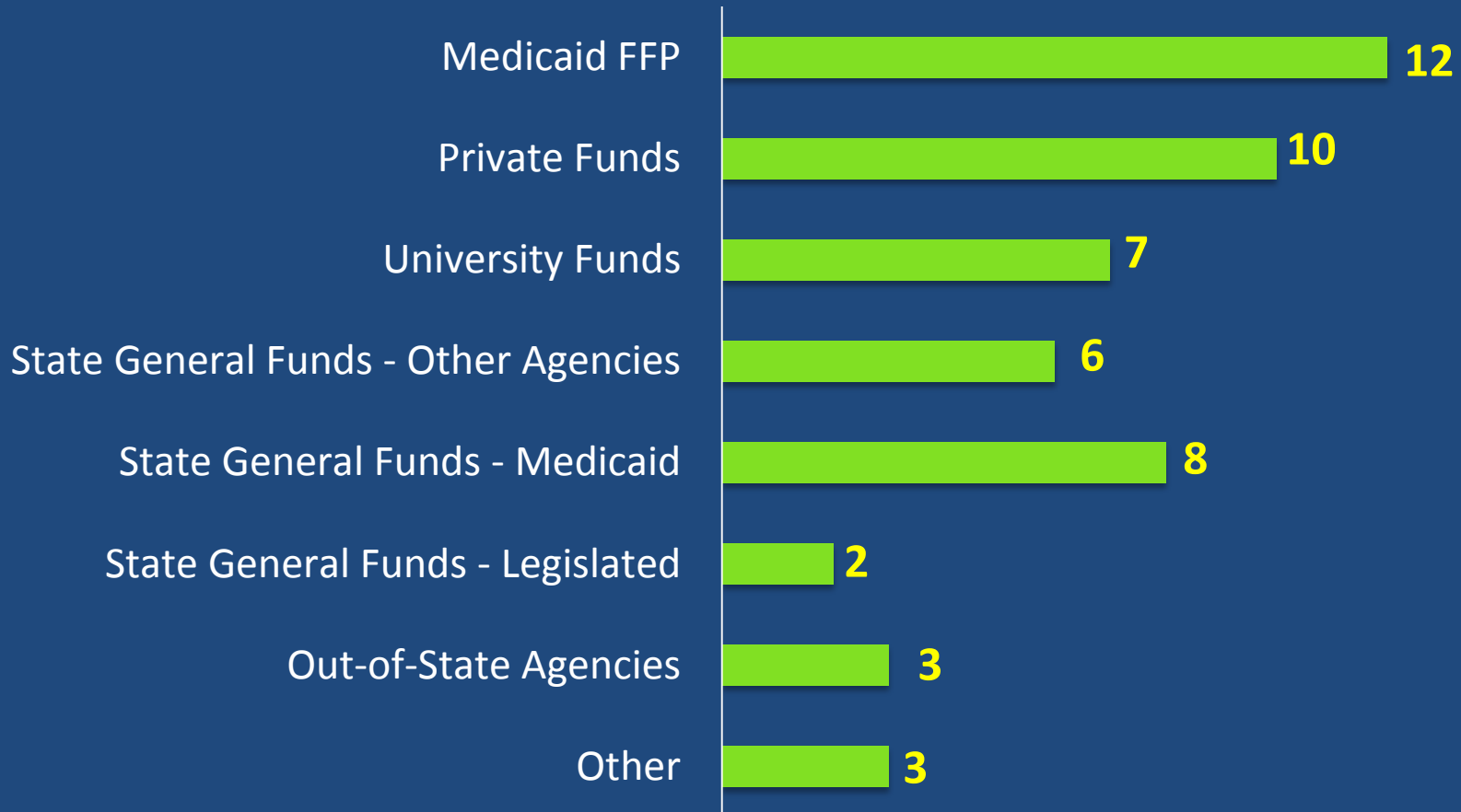
Number of University Partnerships with:



# Funding Sources

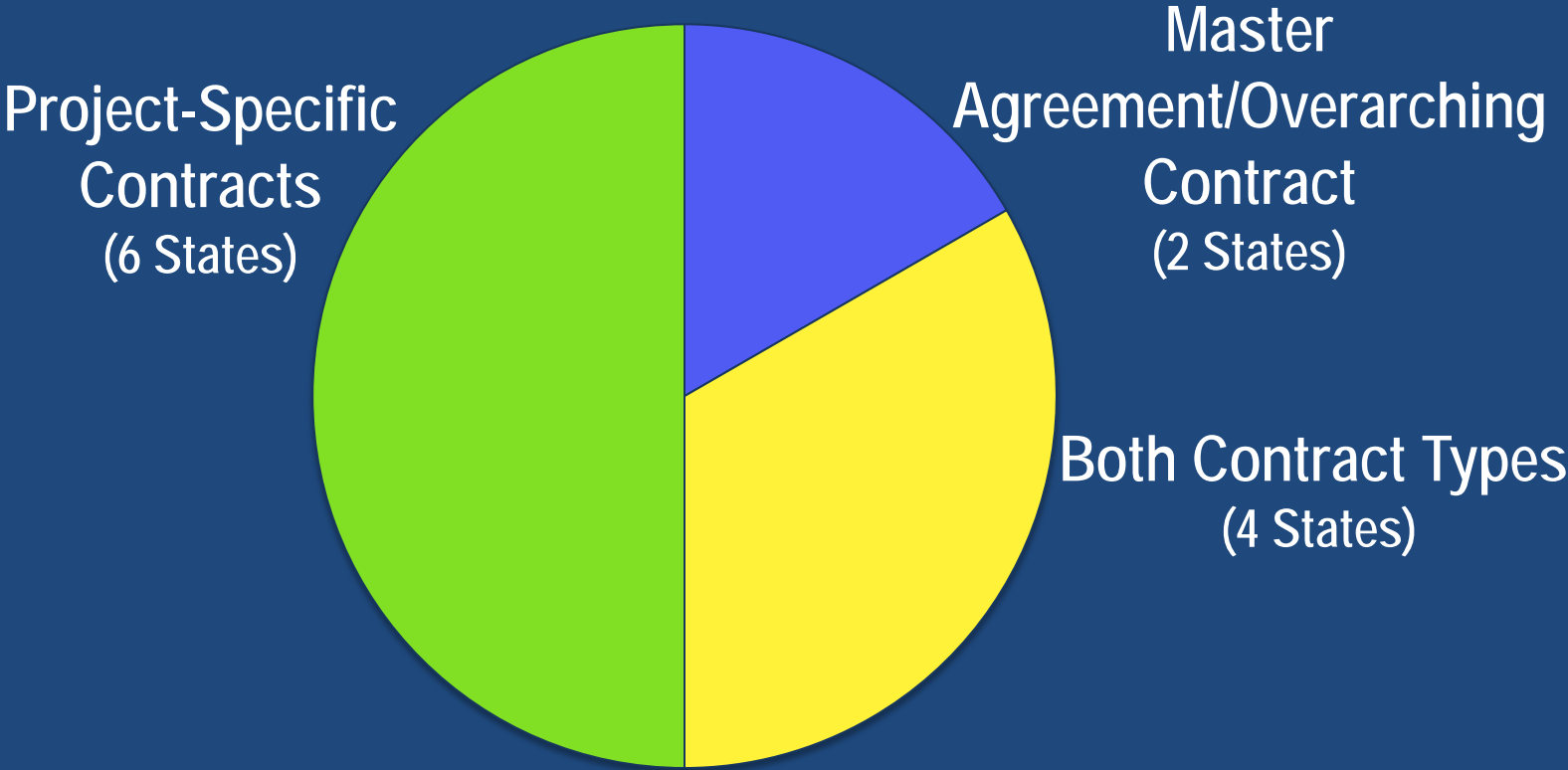
-- All receive Medicaid FFP --

Number of Partnerships





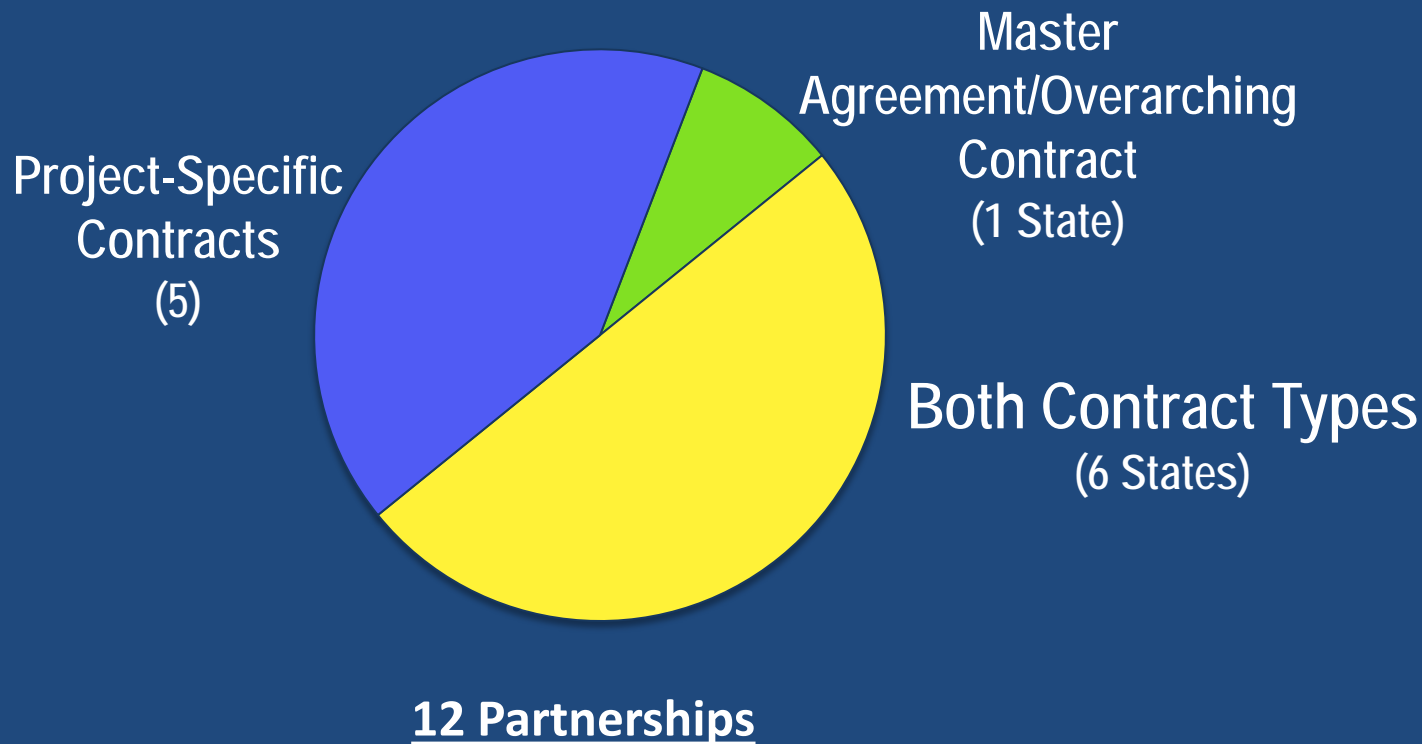
# Contractual Arrangements Vary



12 University-State Partnerships

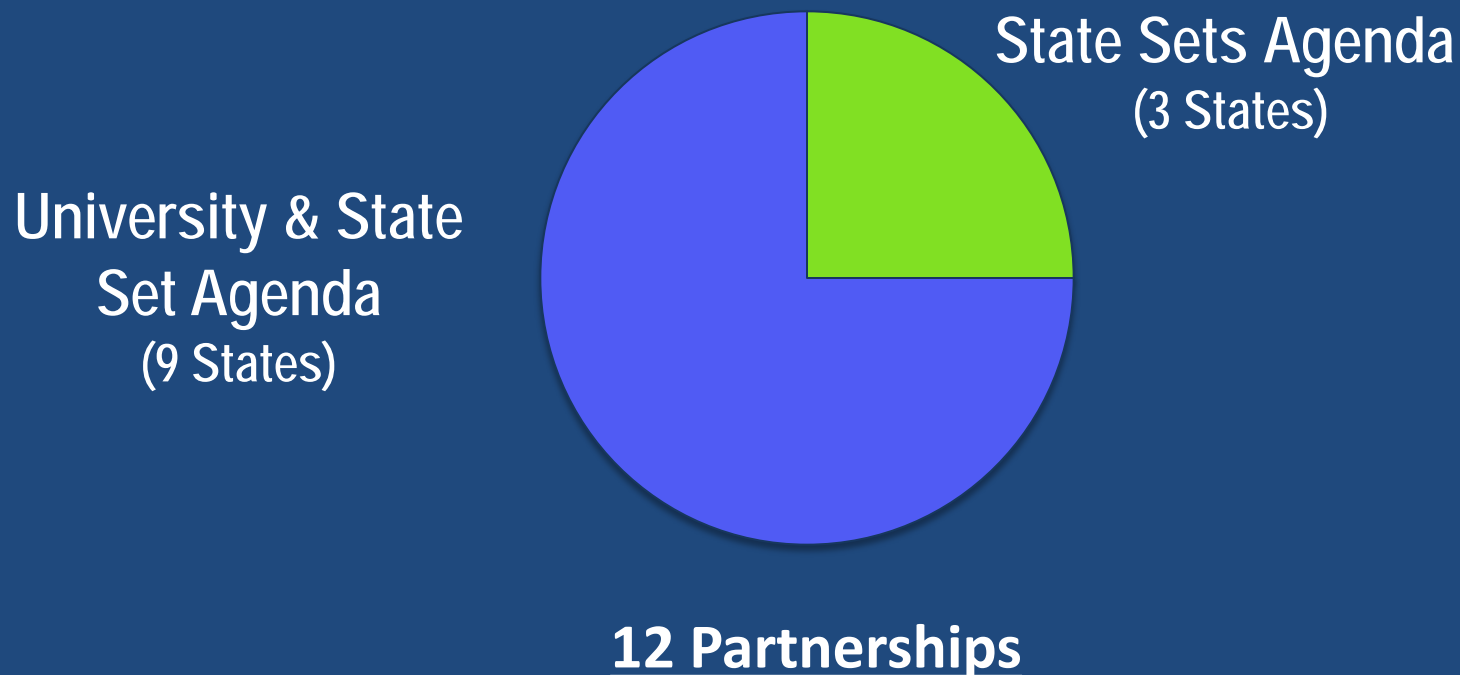
# Protocols for Data Access Vary

Obtaining Data often a Challenge



Timely data access is a common problem, even with careful attention to contract language and included in master agreements

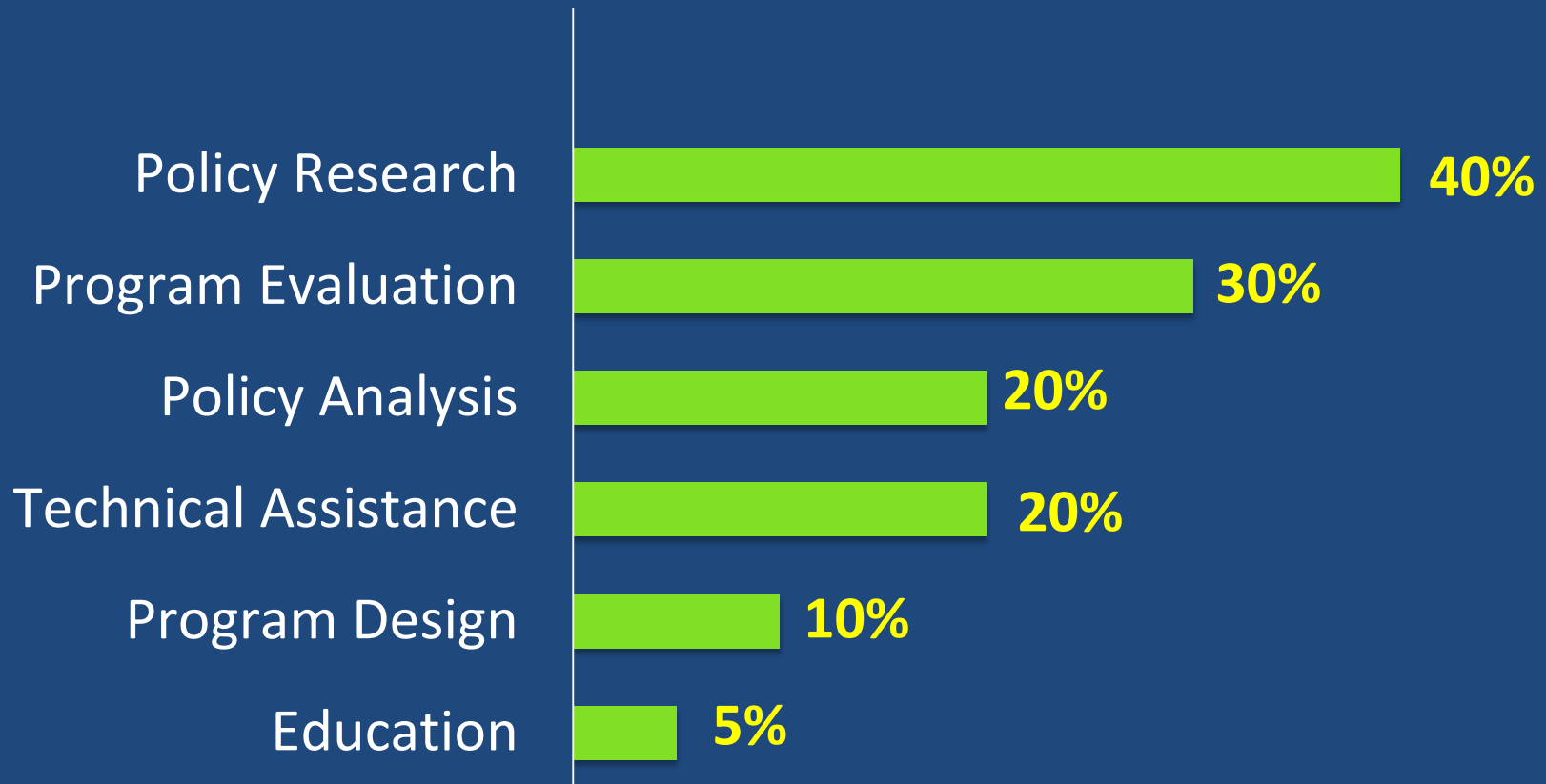
# Most University-State Medicaid Partnerships Mutually Determine Projects



- Striking example of community-based participatory research (i.e. state policy community)
- State involved in agenda-setting in all 12 partnerships

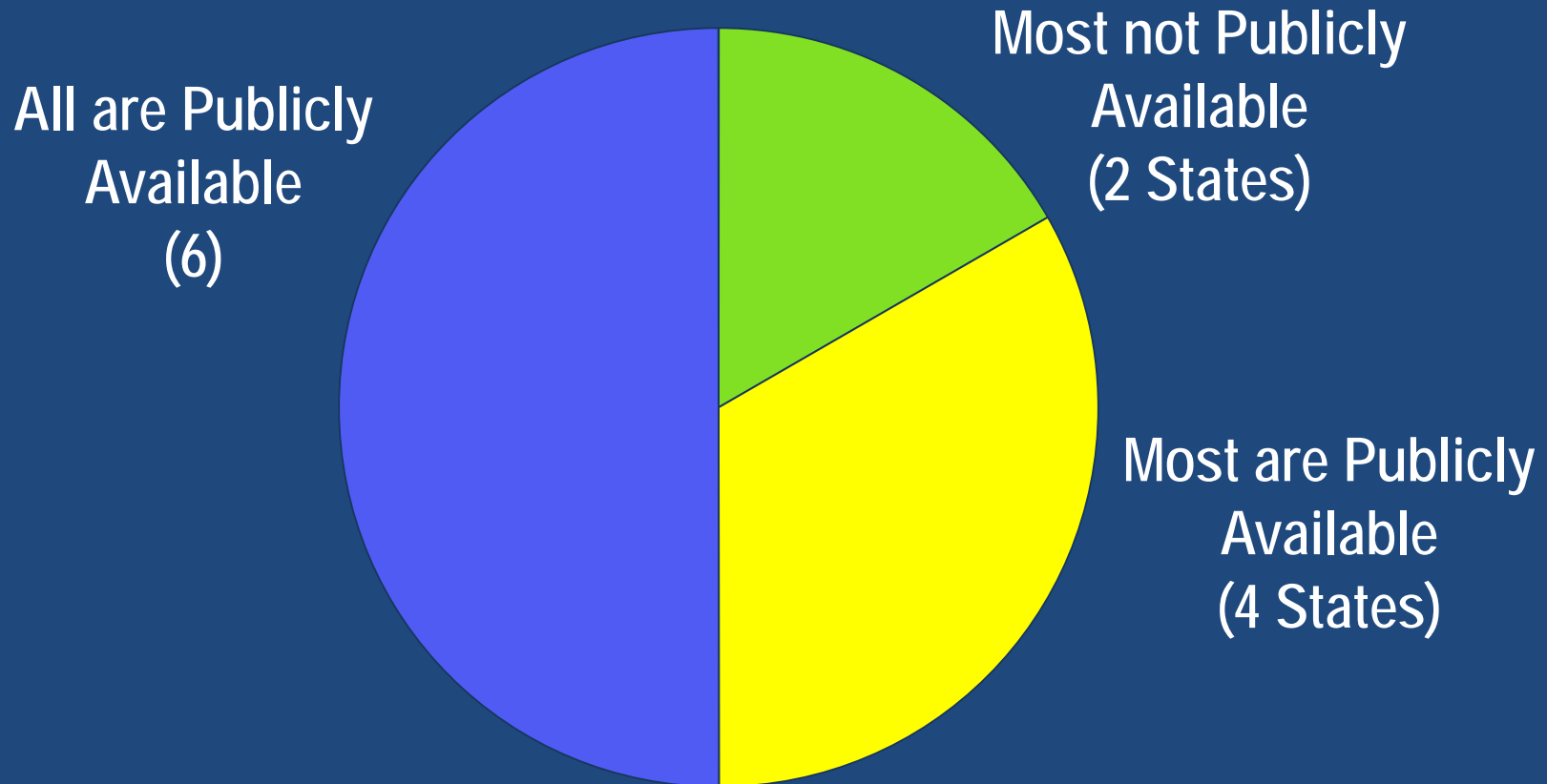
# Types of Collaborative Work

In most states the majority of projects are policy research and program evaluation



# Project Findings & Reports

In most, but not all states, findings are publicly available



12 University-State Partnerships

# Editorial Freedom Rarely Problematic

**9 States**  
Require State  
Editorial Review

**3 States**  
No Editorial Review  
Requirements in  
Contracts

**6 States**  
States Edit,  
but Do Not Make  
Substantive Change

**3 States**  
States May  
Substantially Edit  
Reports

# Agenda is set jointly – but dissemination falls mostly to University

- 11 of 12 partnerships engaged in dissemination. All 11 said the University is a major disseminator of reports (via websites)
- Only 3 partnerships reported the State filled this role -- in all those cases the University was also involved

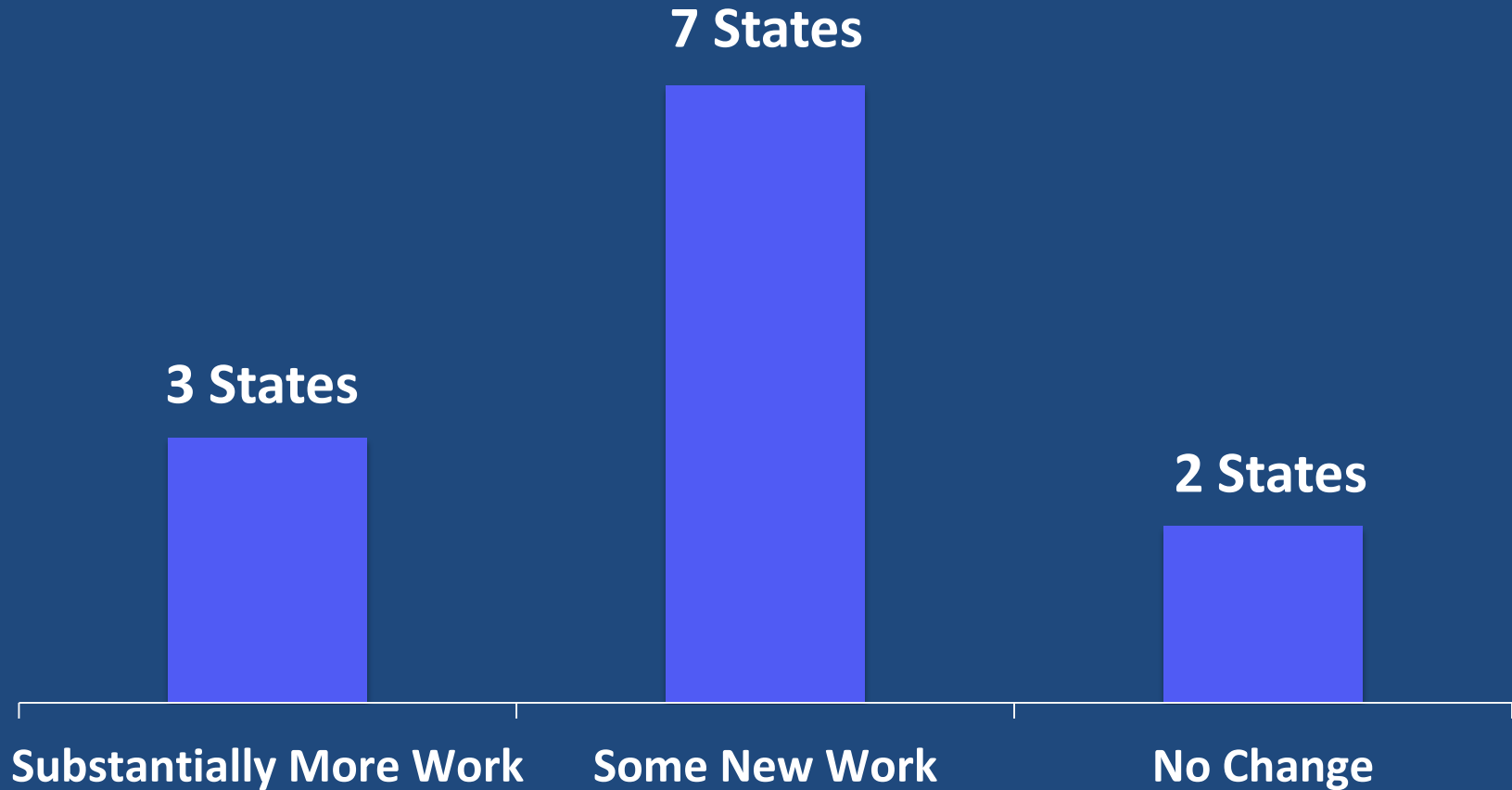
# Policy influence

## (Select Examples)

- Overhaul of Maine's long-term care system
- Implementation of a tool to locate CHIP-eligible children in Maryland
- Formal health policy certificate program in Georgia has taught dozens of state legislators
- Ohio training program equips health providers for work in underserved areas – and subsidizes their education via FFP
- Florida scholars testify on HSR topics regularly before legislators



# *How has the ACA affected the quantity of projects undertaken by the partnership?*



# Potential Barriers

- Timely university access to data
- Timely contracting and execution of projects
  - 6 states reported that completing a project in 6 months or less would be difficult (but not impossible)
  - 6 said it would be relatively easy
- Few states experienced conflict-of-interest problems arising from formal university collaboration
- Despite up to 150 miles separating university and state collaborators, only 3 states reported distance as a barrier to partnership

# Discussion and Implications

- Partnerships thrive in varied forms, often with a mix of contracts
- State agencies primarily set the agenda
- Partnerships have substantially informed policy

# Next Steps

- Interviews with selected state policymakers
- Further outreach to locate latent or emerging partnerships
- Report ready by Fall 2013

# Discussion and Implications

- Older, more sophisticated partnerships apply innovative strategies to speed their work
  - University management of state databases
  - Monthly meetings with state partners
- Third party stakeholders, such as federal policymakers, can leverage partnerships to implement new programs
- A network of these partnerships could help to spread best practices – an idea all partnerships endorsed

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