Addendum II 2012 CMB Open Competition Awards

In response to 2012 Request for Proposals (RFP) of Open Competition (OC) projects, CMB received 123 project applications, of which 29 abstracts from six schools were invited for full proposal development. Ultimately, eight projects were approved for funding. Below is a list and summary description of the eight funded projects.

1) Schizophrenia Case Management in Rural China
Grant No. 12-114
Central South University, China
$109,916 over three years Jan 2013 - Dec 2015

2) Intervention to Decrease Cost of COPD
Grant No. 12-115
Central South University, China
$136,900 over three years Jan 2013 - Dec 2015

3) Improve Pre-hospital Care in China through Training
Grant No. 12-116
Central South University, China
$149,888 over three years Jan 2013 - Dec 2015

4) Reduce Unnecessary Antibiotic Use for Childhood Fever
Grant No. 12-117
Zhejiang University, China
$100,200 over three years Jan 2013 - Dec 2015

5) Improve Maternal Health Services in Rural China
Grant No. 12-118
Sichuan University, China
$145,200 over three years Jan 2013 - Dec 2015

6) The Effects of Provider Payment Method on Reducing Cost of Delivery
Grant No. 12-119
Peking University Health Science Center, China
$117,832 over three years Jan 2013 - Dec 2015

7) The Impacts of DRGs Payment Reform in Beijing
Grant No. 12-120
Peking University Health Science Center, China
$101,889 over three years Jan 2013 - Dec 2015

8) How to Attract Medical Students to Rural China?
Grant No. 12-127
Sichuan University, China
$74,985 over three years Jan 2013 - Dec 2015

1) Schizophrenia Case Management in Rural China (12-114)
   PI: GONG Wenjie, Central South University

This study with a budget of $109,916 is designed to compare the effects of village doctor-assisted case management (VD model) for patients with schizophrenia versus care-as-usual (CAU model) in rural China. It is expected that VD model will lead to higher systematic treatment rate, less schizophrenic symptoms, better social function, lower hospitalization rate, and lower incidence of risky behavior among schizophrenia patients, compared to the CAU model. The research will first carry out a pilot study to develop case management protocols for village doctors to follow. In the main study, patients resided in 40 villages of Liuyang city of Hunan province will be assigned into either the VD model or the CAU model using cluster random sampling methods. A baseline survey will be conducted among patients in all 40 villages. The village doctors in the VD model will be trained with a 3-day case-management course, and work following the protocol for 12 months. After 6 and 12 months, outcomes for patients in both VD and CAU models will be collected and compared.

2) Intervention to Decrease Cost of COPD (12-115)
   PI: YAN Jin, Central South University

This $136,900 project aims to develop, deliver, and evaluate hospital outreach intervention for patients with chronic obstructive pulmonary disease (COPD). A randomized controlled trial will be carried out, under which hospitalized COPD patients will be recruited and randomly allocated into control group or intervention group. The latter will receive hospital outreach intervention, which includes 3-month intensive intervention on pulmonary rehabilitation, medication, self-management education, as well as permanent access to a nurse who will promote patients' treatment adherence through motivational interview and increased communication between patients and health care providers. The evaluation of the trail will be carried out by comparing patients' self-management, health outcome, quality of life as well as health care cost between the control and treatment groups, based on which recommendations for COPD patient hospital outreach interventions will be made. One challenge of the study is to ensure the adherence of the patients to the intervention. The study team will develop intervention manuals and employ interviewing techniques to minimize the lack of adherence.

3) Improve Pre-hospital Care in China through Training (12-116)
   PI: XIAO Ping, Central South University

This three year project with a budget of $149,888 project aims to carry out an observational study of the current status of the county-level pre-hospital care in Hunan province and explore the feasibility of a provincial-wide model to strengthen pre-hospital care services. Based on the observational study, standardized web-based pre-hospital care training will be developed and carried out in regional pre-hospitals centers, half of which will be randomly selected to receive in person training as well. Evaluation of knowledge and critical actions performed by pre-hospital service provider as well as

some key health outcome variables will be compared pre and post the training intervention and suggestions will be made in order to improve pre-hospital care quality.

4) Reduce Unnecessary Antibiotic Use for Childhood Fever (12-117)
   PI: ZHOU Xudong, Zhejiang University

This $100,200 project aims to design, implement and evaluate a non-randomized control intervention in order to reduce inappropriate antibiotic use in childhood fever. The interventions to be carried out in 3 towns in Jiangshan County in Zhejiang province include training rural doctors to use the childhood fever guidelines, implementing economic incentive measures to discourage antibiotic use among doctors, and carrying out health education program for patients. Using the data to be collected before and after invention for both intervention and control counties in Jiangshan County in Zhejiang province, the impact of the intervention will be assessed in terms of the change of the knowledge about antibiotic use, the rate of antibiotic use and infusion use, and average cost per visit for childhood fever.

5) Improve Maternal Health Services in Rural China (12-118)
   PI: ZHOU Huan, Sichuan University

This three year project with a budget of $145,200 aims to evaluate the effectiveness of the conditional cash transfer (CCT) programs in poor counties in Sichuan in promoting the utilization of maternal health services and improving health outcomes of the infants and mothers. The study is based on a randomized controlled trial design, under which 35 pairs of villages matched over their characteristics from five nationally-designated poor counties in Sichuan province will be identified and for each pair, one village will be randomly selected as treatment or control village. All women who become pregnant during the first six months of the CCTs intervention period in the treatment villages will receive a CCT payment conditional on their visits to a hospital for a prenatal check; or to deliver their baby; or for a postnatal check. The evaluation survey will be carried out in the treatment and control villages after the launch of the CCT program for eighteen months to measure the utilization of maternal health services HS and health outcomes of mothers and infants by questionnaire interview and anthropometric measurement, respectively. Using program evaluation techniques, the study will then assess the effectiveness of the intervention.

6) The Effect of Provider Payment Method on Reducing Cost of Delivery (12-119)
   PI: FENG Xinglin, Peking University Health Science Center

This three-year project at $117,832 intends to provide empirical evidence on how various provider payment approaches affect the effect of demand side subsidies in alleviating impoverishment due to costly delivery care in rural China. The study will be carried out in different counties, where different provider payment schemes are applied. Women who recently delivered in hospitals in the study counties will be randomly sampled using a clustered sampling framework, their medical and reimbursement records will be checked and their households will be interviewed and followed up 9-12 months later to investigate

early discharge, health outcomes and the impoverishment due to expensive delivery care and its subsequent consequence.

7) The Impacts of DRGs Payment Reform in Beijing (12-120)
PI: JIAN Weiyan, Peking University Health Science Center

This $101,889 aims to evaluate the impact of Beijing's Diagnose-Related-Groups (DRG) payment reform on health expenditure and quality of care and identify barriers and pre-conditions necessary for successful implementation of DRG reform. Using hospital discharge data, inpatient claims data, and inpatient and outpatient expenditure data 2009-2014 (three years pre- and post-reform), the study applies a differences-in-differences (DID) design with propensity score matching (PSM) to evaluate the impact of this reform on medical expenditure, treatment pattern, and medical service quality by comparing these outcome variables between the 6 reform hospitals and 6 control hospitals before and after the reform.

8) How to Attract Medical Students to Rural China? (12-127)
PI: LI Qian, Sichuan University

This three year project with a budget of $74,985 project aims to identify effective policy interventions that improve rural recruitment and retention of health professionals in Western China. The study will first examine the effect of pecuniary and non-pecuniary job attributes on medical graduates' choices for a rural posting using a discrete choice experiment (DCE), using data on the stated preference among the final year medical graduates in four western provinces in China. The interviewed medical graduates will then be followed up immediately after graduation and one year after graduation and their actual career choices (revealed preferences) and changes over time will be further analyzed in order to shed light on human resources (HR) policy packages that can help improve rural attraction and retention for health professionals.