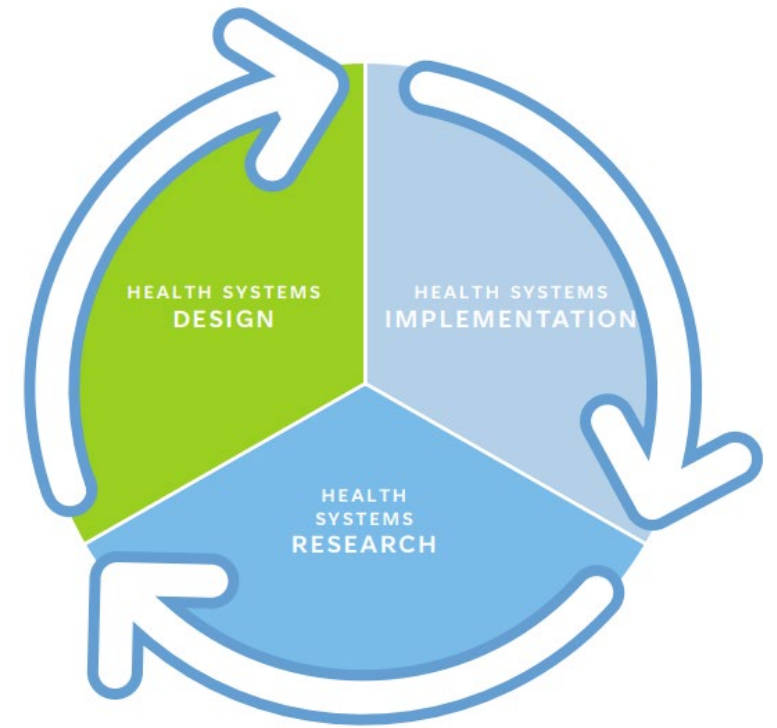


# Measurement and Evaluation Committee

BLUEPRINT EXPANSION PILOT



# Today's Work

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Welcome

- Updates – Legislative/Agency Status and Other Work Groups

Focus

# Legislative/AHS Update

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- Budget approved
- State process approval

# Program Design Updates

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## Screening Tools – Year One

- Social Determinants of Health Screenings or Narrative Patient and Family
- Developmental Screenings according to evidence-based guidelines
- Mental Health Screening
- Substance Use Disorder Screening (Including Tobacco)

# Payment Updates

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- Finalizing model for distribution of allocated funds
  - Based on Medicaid attributions and recommended staffing floors
  - Administrative entity (centralized) or practice (embedded) recommendations for location of CHT Staff
- Targeting payment distribution starting August 1, 2023

# Evaluation Framework - ADOPTION

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**Question: How well was the expansion pilot adopted by target staff, practices, and institutions?**

**Possible Indicators:**

- #/FTE staff added to PCMH, by type
- Change in knowledge, skill, and competency of providers and clinicians.
- Ability to meet program requirements
  - Screening
  - Intervention
  - Follow-up
  - Referrals

Acceptability, appropriateness, and feasibility of program for organization and community.

# Evaluation Framework - IMPLEMENTATION

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**Question: Was it implemented as planned? Were there any adaptations made? Were the funds used as intended?**

**Possible Indicators:**

- Staffing menu selections
- Vacancies
- Staff turn-over
- Training attendance
- QI utilization
- Screening type and frequency
- Intervention type and frequency
- Follow up type and frequency
- Referral agreements
- Referrals/Consultation
- Ratio of identified need to served need

# Adoption/Implementation – Year One Reporting

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- Number of participating practices (attestations)
- Stage of implementation of practices (recruitment stage, orientation/training, hired)
- Staffing types/FTE hired
- Embedded vs. centralized staff access
- QI Engagement
- Feasibility, appropriateness, and acceptability to practices/providers and administrative entities\*



# Practice/Provider Survey – Year One

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10-12 questions (includes 4 about patient/family experience from last session), questions vary dependent on status of implementation

Combination of Y/N, Likert scale, and open-ended responses.

Distribution and analysis in late October 2023 by Blueprint Central Office Staff

Clear explanation of how information will be used and invitation to provide more feedback at later date.

## -Working Definitions:

- Feasibility: factors that impact the viability of a health service
- Appropriateness: care that is effective, efficient and in line with ethical principles of fair allocation (WHO definition)
- Acceptability: the extent to which people delivering or receiving a healthcare intervention consider it to be appropriate, based on anticipated or experienced cognitive and emotional responses to the intervention<sup>1</sup>. Acceptability is a necessary but not sufficient condition for effectiveness of an intervention, and successful implementation depends on the acceptability of the intervention to both intervention deliverers and recipients<sup>2</sup>.

# Administrative Entity Experience

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Structures and communication – quarterly reports, portal, Assistant Director and PM/CHT/QI meetings, Central Office community and practice visits

- How resources are being allocated to practices
- How Administrative entity is building access to centralized resources
- Administrative entity hired vs. sub-contracted vs. practice hired
- How the expansion pilot is impacting CHT / community's ability to meet patient and family needs

# Year Two

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## Evaluation RFP(s)

### Qualitative

- Patient and Family interview and/or focus groups
- Practice and Provider surveys and/or interviews
- Administrative Entity interviews
- Community Partner surveys and/or interviews

### Quantitative

- Claims and clinical data

# Timeline

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~~Session 1 - March 22, 2023 - Group formation, Stakeholders, Evaluation Principles~~

~~Session 2 - April 5, 2023 - Logic Model~~

~~Session 3 - April 19, 2023 - Forming Evaluation Questions~~

~~Session 4 - May 3, 2023 - Flex~~

~~Session 5 - May 17, 2023 - Matching Questions with Measures~~

~~Session 6 - May 31, 2023 - Measures / Data Collection - Quantitative - Reach and Effectiveness~~

~~Session 7 - June 14, 2023 - Measures / Data Collection - Qualitative - Impact on Patient and Family Experience~~

~~Session 8 - June 28, 2023 - Measures / Data Collection - Qualitative - implementation and adoption survey (Provider and Partner Experience)~~

# Next Steps

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RFP Posting (ASAP) and Vendor Selection (earliest estimated October 2023)

October 2023 – Key data collection period

December 15, 2023 – Internal AHS report due

E&M Committee invitation to reconvene later this year – Year 2 Evaluation (Late Fall)

- Either combining with Program Design or meeting after key programmatic recommendations have been made.

January 15, 2024 – Year one evaluation report due to Legislators