



2017-2018 Call for Medicaid Managed Care Best Practices

[Due by April 10, 2017](#)

The **Institute for Medicaid Innovation** (IMI) in partnership with **Medicaid Health Plans of America** (MHPA) is pleased to announce that we are accepting submissions from member plans that highlight innovative and promising best practices.

This year we are seeking submissions specific to the following categories:

1. **Children's Health Ages 0-18 Years** *(including children with chronic conditions and complex healthcare needs)*
2. **Women's Health Across the Lifespan** *(including preconception, prenatal, postpartum, and interconception care)*
3. **Behavioral Health**
4. **Long-Term Care & Transitions of Care**
5. **Oral Health**

Information & Instructions

Submissions will be reviewed by the Institute's Best Practice Review Panel for potential inclusion in the 2017-2018 Medicaid Managed Care Best Practices Compendium. The compendium will be published in October 2017 and released as part of the annual IMI awards luncheon held at MHPA's annual conference. Last year's compendium can be accessed at www.medicaidinnovation.org/current-initiatives/best-practices.

Eligibility: All MHPA health plan members are eligible to submit best practices for consideration of inclusion in the compendium and to be honored at the annual awards luncheon.

Decisions: Final inclusion in the compendium and award selection is based on program scores and recommendations by members of the Best Practices Review Panel. Members of the panel representing health plans recuse themselves from scoring and discussing their own plans or direct competitors in the same state.

Key Definitions: **Innovative best practices** represent initiatives that have been implemented in the Medicaid population for at least one year and outcome data is available.

Promising best practices represent initiatives that are in the early stages of implementation and may not have outcome data available yet.

Requirements: Each health plan market may submit **up to ten (10)** innovative or promising best practices. Each best practice submission must use this form; one form for each best practice. Attachments containing charts, graphs, and tables must be submitted as excel files. Graphics of the initiative (e.g., cover of patient brochure) and/or pictures of the team that led the initiative **must be** submitted as high-resolution .jpg or .eps files.

Submission: To submit your best practice(s), please complete the following form and return to: Shawnise Thompson (sthompson@medicaidinnovation.org) and Ashley Gray (agray@medicaidinnovation.org) by **Monday, April 10, 2017**.

Late submissions will not be accepted to ensure that everyone is given equal opportunity for review. Additionally, **edits will not be accepted** after you submit your best practice. However, you may request to withdraw your submission at any time.

All submissions will receive a confirmation of receipt email. If you do not receive an email, please call Shawnise Thompson and or Ashley Gray. Only submissions that we confirm receipt will be reviewed.

If you do **NOT** receive an emailed confirmation of receipt within 24 hours of submission, please call Shawnise (202-857-5773) or Ashley (202-857-5726).

INSTITUTE FOR MEDICAID INNOVATION

2017-2018 BEST PRACTICES REVIEW PANEL

Anne De Biasi, MHA

Director of Policy Development
Trust for America's Health

Meg Booth, MPH

Executive Director
Children's Dental Health Project

Stacy Collins, MSW

Associate Director of Health System
Transformation
Association for Maternal & Child Health Programs

Nathaniel Counts, JD

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Mental Health America

Wendy R. Ellis, MPH

Milken Scholar, Health Policy
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Frederic S. Goldstein, MS

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Caroline A. Grossman

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Anne M. Kaeser, MD, MBA

Senior Medical Director
Aetna Medicaid Utilization Management

Andrew Sperling, MA, JD

Director, Federal Legislative Advocacy
National Alliance on Mental Illness

Robert K. Thielen, DDS, MBA

National Dental Director
Aetna Medicaid

2017-2018 Medicaid Managed Care Best Practices Submission Form

Health Plan Name:

Instructions: Please specify exactly how you wish your organization/company to be listed in the compendium, if selected. For health plans submitting best practices for multiple plans in a parent organization, please collect internally to determine the name you would like listed in the compendium, if selected.

Initiative Name:

Instructions: Please provide the official name of the initiative, as you would like it to be listed in the compendium, if selected. Please include any registrations or trademarks.

Category

Instructions: Please select **one (1)** category that applies to this initiative.

Children's Health Ages 0-18 Years (including children with chronic conditions and complex healthcare needs)

Women's Health Across the Lifespan (including preconception, prenatal, postpartum, and interconception care)

Behavioral Health

Long-Term Care & Transitions of Care

Oral Health

Abstract of Initiative

Instructions: Please provide a brief (**LIMIT: 150 words**) overview describing your initiative. The description should summarize the initiative implemented and primary or preliminary findings and how your plan addressed social determinants of health, including the coordination of community services, if applicable.

Goal of Implementing Initiative

Instructions: Please list the primary goals that were identified prior to the implementation of the initiative, including those tied to social determinants of health.

Key Partners and Community Groups

Instructions: Please list the key partners and/or stakeholders that were instrumental in developing and sustaining this initiative and how you contracted with/reimbursed these groups (**LIMIT: 50 WORDS**)

History of Initiative

In what year did the initiative begin?

Have you previously submitted this best practice for inclusion in the compendium?

Yes

No

*If yes, please describe how this submission is different from previous years (**LIMIT: 50 words**). In other words, what new information has been learned or outcomes achieved?*

Description of Target Population

Instructions: *Please provide a brief description (**LIMIT: 50 words**) of the population including the number of beneficiaries that the initiative impacted, age range, gender, race/ethnicity, geographic location, etc.*

What was the total number of beneficiaries enrolled in this initiative?

Briefly describe (**LIMIT: 50 words**) why you focused on this population (i.e., high-cost group, responsive to local, state or national priorities, etc.).

Significance of Initiative

Instructions: Describe the issue (**LIMIT: 100 WORDS**) that this initiative is addressing and why it is important to the target population, specifically identifying the social determinants of health contributing to this issue.

Geographic Location

Instructions: Please **list** the location(s) of the initiative including city and state.

Detailed Description of Initiative

Instructions: Please provide a detailed description (**LIMIT: 300 WORDS**) highlighting the core components of the initiative. The description should explain how this initiative is unique and innovative, addresses key health issues in the Medicaid population, and addresses social determinants of health, engagement of community partners, and coordination of community services.

How did you integrate culturally appropriate approaches to delivering care and improving health equity as a part of this initiative? (**LIMIT: 50 WORDS**).

Methods (If applicable to this initiative.)

Instructions: Please briefly describe (**LIMIT: 100 WORDS**) how your organization utilized predictive modeling, quality improvement techniques, hot spotting, geocoding, or other methods (e.g., peer-to-peer, use of social networks, train-the-trainer) to develop and enhance the success of your initiative.

Outcomes (If applicable and available for this initiative.)

Instructions: Provide a brief description (**LIMIT: 100 WORDS**) for each outcome category below. If you **DO NOT** have outcome data to report for one or more items below, **LEAVE IT BLANK**. For items in which you have data, describe specific outcomes, both quantitative and qualitative. Identify the year(s) that the data represents. Please include p-values if applicable. Submit tables, graphs, or charts highlighting key outcomes as a **separate excel file**.

Patient/Family Outcome (e.g., HEDIS scores, satisfaction scores, rate of retention in initiative, feedback from families and communities, addressing social determinants of health, etc.) (**LIMIT: 100 words**)

Clinician Outcomes (e.g., percent participation, satisfaction, changes in referrals, rates of engagement in initiative, etc.) (**LIMIT: 100 words**)

Community Impact (e.g., participation rates in community groups, referral rates for community services, engagement of stakeholders and partners, etc.) (**LIMIT: 100 words**)

Cost Savings (e.g., return on investment, near term savings, lower emergency department visits, adherence to medical management, etc.) (**LIMIT: 100 words**)

Sustainability

*How will you sustain this initiative long-term? What additional resources are needed to support the initiative in the future? (**LIMIT: 100 words**)*

Challenges

*What challenges did you encounter during implementation and how did you address them and/or how are you continuing to address them? (**LIMIT: 100 words**)*

Successes

What are the key elements that you attribute to the success of this initiative (e.g., engagement of community stakeholders, utilization of evidence-based interventions, support from corporate office, etc.)? (**LIMIT: 100 words**)

Would an initiative like yours be potentially replicable for other health plans?

Yes

No

What advice would you give to other plans that are interested in replicating this initiative? In other words, what are the lessons learned? (**LIMIT: 100 words**)

Key Supporting Evidence

Instructions: Please list key references (APA format) that informed the development of the initiative. (**LIMIT: 10 references**)

Acknowledgement of Funder(s)

Instructions: Please list any sources of funding that supported the project. If applicable, attach the logo of the funder as a high-resolution .jpg or .eps file.

Kudos to the Team

Instructions: Please list the name, credential, title, organization, email, and phone number of the individual that led the initiative. List the names and credentials of the team members. Please attach a picture of the team as a high-resolution .jpg or .eps file.

Team Lead

Name/Credentials:

Title:

Health Plan:

Email:

Phone:

Team Members (Name and Credentials and Title)

Contact Information

Primary Contact Person:

Title:

Phone Number:

Email:

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