

Clinics Pathway Approach - NACHC Payment Reform Readiness. Assessment Tool

Thank you for your interest in participating in the Episcopal Health Foundation's (EHF) **Clinics Pathway Approach!** All prospective applicants need to complete the following Payment Reform Readiness Assessment Tool developed by the National Association of Community Health Centers (NACHC). We recommend that clinics involve a multi-disciplinary team in completing this assessment in order to generate a more representative, meaningful response overall. Applicants should use results from the Readiness Assessment to guide their proposal responses and identify how EHF funding will support building capacity within specific domain(s) highlighted as gaps in their assessment results. The deadline to complete this assessment is **November 22, 2019**.

Enter the name of your organization

Enter the name of your organization's primary contact

Enter the email information for your organization's primary contact

Question 1 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center relies on key leaders and staff to support transformation efforts based on their individual expertise and knowledge. Change and/or clinical practice transformation happen organically, led by department heads."
- A self-assessment of **4-6** indicates "Leadership and key staff share a collective understanding of the vision and strategic plan for transforming services and payment. Health center has a written succession plan that will sustain and develop the organizational vision for transformation. The succession plan addresses not only leadership but also key staff managing transformation efforts."
- A self-assessment of **7-9** indicates "Leadership remains focused on its vision and is not distracted by opportunities that do not align with that vision. Staff involved in transformation efforts can describe and explain organizational succession plans. The organization has documented processes and systems to manage and transfer knowledge related to transformation efforts. Staff responsible for implementing transformation efforts can ask for and receive the resources they need. Accountability mechanisms are in place and are systematically applied to BOD and staff strategic and operational planning"

Leadership and staff have a system to ensure that knowledge and expertise needed is sustained for current and future transformation efforts	1	2	3	4	5	6	7	8	9
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Question 2 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "The BOD regularly receives information/training regarding local and state transformation programs, including how service delivery and payment reforms relate to current models (including health center prospective payment system [PPS] payment)."
- A self-assessment of **4-6** indicates "Payment reform and service delivery transformation are substantive components of BOD strategic planning processes and discussions. The BOD can describe the relationship between payment reform and practice transformation efforts."
- A self-assessment of **7-9** indicates "The BOD has prioritized preferred service delivery and payment models. The BOD can describe the organizational implications for engaging in them, including assessing desirability of risk-based arrangements."

The Board of Directors (BOD) is knowledgeable about payment reform efforts and their implications for the health center's mission and services.	1	2	3	4	5	6	7	8	9
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Question 3 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Board of Directors (BOD) has analyzed requirements for representation in governance structure of initiatives."
- A self-assessment of **4-6** indicates "Bylaws, membership requirements and conflict of interest policies of health center have been reviewed and modified as needed to allow for incorporation of new BOD members if required by the initiative. Health center is active member in PCA or other entities (e.g. Independent Practice Associations) facilitating health center involvement in initiatives."
- A self-assessment of **7-9** indicates "Health center is represented (directly or through PCA) in governance and advisory body of service transformation and payment reform initiatives, including care integration, ACOs, and Medicaid initiatives. Where the health center is the primary entity behind a multi-entity service delivery effort, the health center BOD serves as the governing body for the effort, incorporating representation from other organizations as appropriate and allowed for in the health center's by-laws."

The health center's governance requirements and structure facilitate any related governance role requirements of value-based initiatives.	1	2	3	4	5	6	7	8	9
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Question 4 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has strong referral relationships with behavioral health providers"
- A self-assessment of **4-6** indicates "Behavioral health services are offered on site with warm hand-off. Behavioral health team members such as licensed clinical social workers are integrated into care team at some sites. Health center is reimbursed appropriately to cover costs associated with integrated services."
- A self-assessment of **7-9** indicates "Behavioral health and substance use disorder services are provided through a team-based, multi-disciplinary, and comprehensive approach to patient-centered care. Integrated care teams include licensed behavioral health specialists (e.g. psychiatrists, psychologists, and psychiatric nurses). Integrated care teams share accountability for positive health outcomes, particularly in areas in which close coordination between medical and behavioral health care is required (e.g. schizophrenia). Health center is engaged in efforts to improve reimbursement models supporting integrated behavioral health care and substance use disorder services."

Behavioral health services are integrated with primary care services.	1	2	3	4	5	6	7	8	9
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Question 5 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center regularly identifies and assesses needs of the population in its service area (including overall demographics, insured status, and health needs). Health center has analyzed degree to which current services meet identified service area needs. Leadership staff have discussed transformation opportunities, implications for the health center, and the relationship between transformation and mission."
- A self-assessment of **4-6** indicates "The organization has a comprehensive strategic plan, including a shared vision with specific aims and written principles/priorities for engagement in transformation efforts. Health center has established criteria for involvement in payment reform that include ability to impact health center mission and focus, including willingness and ability to generate new/additional resources (such as services and revenue. These criteria/principles/priorities are regularly shared and understood throughout all levels of the organization."
- A self-assessment of **7-9** indicates "Health center vision reflects its role within the context of the delivery and payment system as a whole— recognizing interdependency and collaboration throughout the system."

Leadership and staff share an organizational vision and plan to transform in alignment with mission and financial sustainability.	1	2	3	4	5	6	7	8	9
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Question 6 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has informal relationships with other providers and payers. Health center participates in population-level community health assessments. Health center participates in community level health related coalitions, and committees."
- A self-assessment of **4-6** indicates "Health center has formal partnerships to address specific needs of target population. Health center has established and articulated a negotiation /partnership strategy to guide its efforts. Health center is able to articulate its "value proposition" to potential and existing partners (e.g. the particular strengths and opportunities it brings to partnerships)."
- A self-assessment of **7-9** indicates "Health center leads partnership development efforts involving multiple partners to develop integrated service delivery and payment approaches. Health center is involved in multi-sectoral partnerships beyond health providers that focus on addressing community-level systems of care and payment. Health center proactively develops multi-sector partnerships to address health conditions such as asthma, obesity, teen pregnancy, etc., that are strongly impacted by social and environmental factors."

The health center identifies and pursues strategic partnerships to achieve its transformation vision and foster financial sustainability.	1	2	3	4	5	6	7	8	9
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Question 7 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center is a member of community coalitions and other organizations addressing community-wide efforts addressing public health and health care. Staff participating in coalitions are primarily those leading health prevention and promotion efforts or communications staff."
- A self-assessment of **4-6** indicates "Health center staff including senior-level clinical and administration help plan and implement efforts in population health assessments and coalitions."
- A self-assessment of **7-9** indicates "Health center is part of a provider network that has analyzed utilization patterns and service delivery needs of the service area population. Health center has identified opportunities to address service delivery needs. Health center has formal partnerships in place, with rigorous Memoranda of Understanding/role definition to create new products/services in anticipation of target population needs or to take advantage of new payment reform opportunities."

The health center is engaged with key partners (e.g. with local hospitals, specialists, payers) to meet care and payment transformation goals.	1	2	3	4	5	6	7	8	9
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Question 8 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has established positive working relationships with key partners such as hospitals, specialists, social service organizations, employers, law enforcement, and payers in the service area. Health center has a detailed understanding of the motivations and challenges driving partnerships in transformation initiatives."
- A self-assessment of **4-6** indicates "Partnerships are yielding additional resources to support health center transformation efforts. Health center partnerships have improved quality and outcomes of care through focused collaborations with specific utilization and/or health outcome goals, such as hospital diversion programs, improving care transitions, or enhancing workflows for primary care. Health center, hospital and /or specialty groups have together analyzed utilization patterns and service delivery needs of the service area population and opportunities to address them. Payers support health centers in identifying and addressing preventable high costs within the patient population."
- A self-assessment of **7-9** indicates "Health center has analyzed and shared the cost-effectiveness and outcomes of partnership efforts. Through timely, actionable, and accurate reports or other mechanisms, payers support health centers in identifying and addressing preventable high costs within the patient population. Health center is a trusted resource working closely with payers and other partners to help shape new payment models supporting the health center's transformation vision."

Health center partnerships yield tangible benefits for the organization's transformation efforts, their patients, and the population served.	1	2	3	4	5	6	7	8	9
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Question 9 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center focuses primarily on obtaining specialty, behavioral health, substance use disorders, and hospital care for patients needing follow-up care. Health center has referral relationships with community organizations addressing social determinants of health. Referrals are made and tracked, but there is not a system for determining whether referral is successfully completed."
- A self-assessment of **4-6** indicates "Health center has established processes for establishing patient-driven care plans and ongoing follow-up and patient support for the plan, using motivational interviewing or other techniques. Health center has referral tracking and follow-up systems and a workforce with the ability to support those systems. Health center uses health coaches/ community health workers to support care coordination among other providers such as specialists and hospitals as well as other sources of support such as organizations addressing social determinants of health"
- A self-assessment of **7-9** indicates "Health center care teams have the flexibility to coordinate with community services, particularly those addressing social determinants of health. Health center staff has the ability and systems needed to provide patients with a seamless care experience, coordinating health and social services addressing patients' preventive, primary care, oral health, pharmacy, vision, behavioral health and substance use disorder needs. Health center contracts with ACO/managed care organization to provide care management/ coordination for high utilizer patients in the service area, beyond its own patients."

The health center coordinates and manages care throughout the delivery system.	1	2	3	4	5	6	7	8	9
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Question 10 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center staff regularly receives training on cultural humility. Health center asks patients about their preferred language, pronouns, and modalities for communication."
- A self-assessment of **4-6** indicates "Staff uses evidence-based techniques such as motivational interviewing to understand patient needs. Health center communicates with patients in a culturally appropriate manner and in the client's preferred language, pronouns, and modalities."
- A self-assessment of **7-9** indicates "Health centers use every "touch point" with patients and the community to strengthen their relationships with current and future patients and their families. Through shared decision-making, patients are co-creators of their care plans and are provided with self-management support. Health center staff is recruited directly from the community served. Cultural humility is an established and recognized core value of the health center."

The health center provides patient-centered care.	1	2	3	4	5	6	7	8	9
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Question 11 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center relies on key leaders and staff to decide on and support transformation efforts based on their individual expertise and knowledge. Change and/or clinical practice transformation happen organically, led by department heads."
- A self-assessment of **4-6** indicates "Health center includes staff from multiple levels and disciplines when shaping a change initiative. The organization dedicates resources needed to build staff capacity for change management through training, coaching, and mentorship. Appropriate organizational resources (staff, technology, etc.) are dedicated to supporting the change process. Leaders have developed strategies to address past negative experience with change."
- A self-assessment of **7-9** indicates "Staff can articulate the overarching vision for transformation and how a particular change initiative fits within the vision. Reflection and continuous learning are institutionalized within the organization and beyond. Change management processes are embedded in the organizational culture including job descriptions, performance review and organizational benchmarks/score cards."

The organization appropriately and adaptively communicates and manages change to sustain current and future transformation efforts.	1	2	3	4	5	6	7	8	9
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Question 12 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center offers some extended hours, including evenings and weekends."
- A self-assessment of **4-6** indicates "Health center scheduling practices and operating hours are patient- and family centered, including open/same day/next-day scheduling as well as extended hours, as needed. Health center tracks and monitors indicators of patient experience and engagement. Health center provides a secure, electronic patient portal in appropriate languages for patients to access their records and schedule care."
- A self-assessment of **7-9** indicates "Patients have 24/7 access to care team via phone, email or in-person visits. Health center has collaboration with other providers for readily accessible urgent care (or provides care directly). Health center engages with patients by using a variety of modalities (e.g. nonface to face visits such as telehealth, email, text-message, and phone; as well as face-to-face visits to hospitals, specialty centers, homes, and/or places of employment), that ensure high quality and patient satisfaction. Patients use the health center electronic patient portal for access to patient records, scheduling of care, visit summaries, interactions with care teams, and access to educational materials."

The health center has systems to support timely access to care.	1	2	3	4	5	6	7	8	9
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Question 13 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center does not use patient empanelment (assigning patients to a specific provider or care team). Health center uses empanelment, but these assignments are not routinely analyzed for quality improvement (QI) or other purposes."
- A self-assessment of **4-6** indicates "Health center prospectively and formally empanels patients to specific providers or care teams, and these assignments are routinely used for scheduling purposes. Empanelment is not by patient choice but may reflect their utilization history/patterns/care needs".
- A self-assessment of **7-9** indicates "Patient choice is the initial method used to empanel patients. Panel assignments are routinely used for scheduling purposes and to monitor continuity of care."

The health center uses formal, prospective empanelment.	1	2	3	4	5	6	7	8	9
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Question 14 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center reports regularly on financial indicators for monitoring its overall operating margins and financial performance indicators required by UDS."
- A self-assessment of **4-6** indicates "Health center monitors key performance indicators and their trends including but not limited to days cash on hand, days in accounts receivable, net collection rates, net income, payer mix, and utilization rates."
- A self-assessment of **7-9** indicates "Health center compares its key performance indicators to relevant state and local benchmarks to identify and implement strategies for improvement. Health center uses key performance indicators to identify and implement strategies for improvement. Health center staff is able to describe health center financial health based on key performance indicators."

The health center has a solid understanding of its current financial performance under its existing service delivery and payment models	1	2	3	4	5	6	7	8	9
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Question 15 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center identifies complex and costly patients informally or through chart review. Health center has implemented a HRSA sponsored or similar disease collaborative at a minimum of one site."
- A self-assessment of **4-6** indicates "Health center has a system to build organizational capacity to support accurate and specific diagnostic codes needed to characterize patient acuity/illness burden."
- A self-assessment of **7-9** indicates "Health center has a system to build and account for organizational capacity to support accurate and specific diagnostic codes needed to characterize patient acuity. Health center uses practice management data to determine the most effective interventions that improve outcomes and lower costs for complex patients. Health center draws from external data sources (i.e. from payers, hospitals, specialists, etc.) to assess impact of interventions on cost and quality."

The health center addresses cost of care for patients with complex needs (e.g. chronic conditions) and utilization patterns.	1	2	3	4	5	6	7	8	9
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Question 16 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center uses historical costs to identify up-front costs associated with the payment reform initiative including staffing, space, and health information technology (HIT) costs. Cost estimates for service delivery are based on historical health center per visit costs."
- A self-assessment of **4-6** indicates "Cost estimates have been adjusted to account for patient population to be served (vis-à-vis average health center patient) and specific health needs and/ or utilization patterns they experience. Health center can quantify return on investments related to care transformation initiatives."
- A self-assessment of **7-9** indicates "When required, health center has developed per- member-per-month costs for the full scope of services to be offered. Health center has analyzed this cost in comparison to expected reimbursement."

The health center addresses up-front costs of participation in care and payment transformation initiatives.	1	2	3	4	5	6	7	8	9
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Question 17 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center uses only internal data to track patient utilization and costs within the health center model."
- A self-assessment of **4-6** indicates "Health center is reliant on partners and/or state agencies to provide data related to any patient outcomes or performance metrics tied to new payment models. Health center is reliant on partners and/or state agencies to provide data on system costs incurred by health center patients included in new payment models."
- A self-assessment of **7-9** indicates "Health center care teams readily access both its own and system-level data regarding utilization and cost patterns (e.g. specialty, pharmacy, and hospital) of patients in the reform effort to establish high value referral networks."

The health center is able to track system-level utilization and cost data for its patients.	1	2	3	4	5	6	7	8	9
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Question 18 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has understanding of how and when payments will be made, including any incentives, penalties, or wrap payments."
- A self-assessment of **4-6** indicates "Health center understands the impact of anticipated payment flow and timing on operating cash flow projections."
- A self-assessment of **7-9** indicates "Health center has worked with payers to establish payment cycles that enhance the health center's ability to operate successfully in the reform initiative."

The health center analyzes how payment timing and methodology for a proposed payment reform model relates to health center operating cash flow.	1	2	3	4	5	6	7	8	9
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Question 19 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has experience negotiating and managing fee for service volume-based and managed care contracts."
- A self-assessment of **4-6** indicates "Health center has experience negotiating and managing pay-for-performance based contracts, and/or contracts with upside risk only."
- A self-assessment of **7-9** indicates "Health center has (in house or contracted) experience negotiating downside risk-bearing contracts including experience analyzing the anticipated financial outcomes of such contracts. Health center is able to utilize its experiences under past contracts to inform current contracting strategies. Health center uses risk adjustment to support higher payments for higher need patients. Health center uses risk-related data to ensure that factors beyond the health center's influence do not result in lower quality scores."

The health center has experience and capacity to manage performance-based contracts.	1	2	3	4	5	6	7	8	9
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Question 20 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center relies on internal and external expertise to participate in value-based care models. Health center has a system for monitoring and tracking various incentive programs in place from each major payer with which it contracts."
- A self-assessment of **4-6** indicates "Health center is able to discern, prioritize, and negotiate diverse transformation efforts and payment models with different payers and plans, particularly when incentives and durations are misaligned. Health center actively negotiates, during contract process, pay for performance or other incentive metrics that are consistent with quality and process measures already reported by health centers to HRSA, Centers for Medicare and Medicaid Services, or state entities."
- A self-assessment of **7-9** indicates "Health center staff is adept at negotiating and implementing a variety of contracts supporting diverse transformation efforts and payment models with different payers and plans, particularly when incentives and durations are misaligned. Health center is involved (directly or through PCA, IPA, and/or ACO) in payment reform initiatives to employ quality and cost metrics consistent with reporting requirements under other existing initiatives or funders."

The health center leverages value-based payment models to transform care and payment using either internal contracting expertise or expertise through service delivery networks such as IPAs or ACOs.	1	2	3	4	5	6	7	8	9
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Question 21 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has limited its interest to up-side risk (sharing in cost savings or profit) only. Health center has not conducted an analysis of its ability to bear risk, other than identifying reserves available to cover risk."
- A self-assessment of **4-6** indicates "Health center creates a financial model to anticipate the effects based on the identified size of its patient population that would be served and the potential for variation in cost and performance measures. Health center has analyzed its ability to benefit from up-side risk and absorb down-side risk on its own."
- A self-assessment of **7-9** indicates "Health center has ability to be grouped with additional partners for performance assessment and risk sharing. Health center has established a reserve to support payment reform planning and implementation of new models, including risk-based reimbursement."

The health center has analyzed its financial capacity to engage in risk-based contracts.	1	2	3	4	5	6	7	8	9
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Question 22 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center finance, administrative, and clinical staff have a thorough understanding of basis upon which the health center's current payment (e.g. PPS, APM rate) is established, the costs, and services it includes, and how it relates to actual average per-visit costs."
- A self-assessment of **4-6** indicates "Health center has analyzed the degree to which payment reform incentives/ payment mechanisms would result in revenue exceeding existing PPS and/or APM rates. Health center has experience navigating state rate setting, managed care reconciliation, and/or scope change processes for PPS or APM when applicable."
- A self-assessment of **7-9** indicates "Health center has analyzed the impact of proposed APMs on health center revenues and operating cash flows."

The health center has analyzed the relationship between payment reform models and FQHC PPS or FQHC alternate payment methodology (APM) payment for Medicaid.	1	2	3	4	5	6	7	8	9
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Question 23 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Providers paid on salary basis."
- A self-assessment of **4-6** indicates "Provider and/or team bonuses are offered for meeting productivity or quality process benchmarks."
- A self-assessment of **7-9** indicates "The full care team receives financial incentives based on performance/value."

The health center has developed internal payment incentives based on quality and patient outcomes rather than volume.	1	2	3	4	5	6	7	8	9
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Question 24 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center actively tracks grant and other funding opportunities that support service delivery transformation and payment reform initiatives."
- A self-assessment of **4-6** indicates "Health center participates in local, state, and/or federal initiatives supporting service delivery and/or payment transformation (e.g. State Innovation Models, Transforming Clinical Practice Initiative, Comprehensive Primary Care Plus, etc.)"
- A self-assessment of **7-9** indicates "Health center partners with organizations such as behavioral health and social service organizations to help shape service delivery and payment transformation funding priorities at the state, local, and/or federal level Health center serves as the lead of state- and local-level payment initiatives that support efficiency and quality outcomes."

The health center is leveraging all the available state and local assistance and funding to support service delivery and payment transformation efforts.	1	2	3	4	5	6	7	8	9
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Question 25 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has had limited involvement in Human Resources and Services Administration (HRSA)-funded disease collaboratives, Patient Centered Medical Home transformation, or other clinical practice transformation efforts. Continuous Quality Improvement (CQI) efforts are primarily focused on clinical processes."
- A self-assessment of **4-6** indicates "Health center has goals and measurable objectives for quality improvement. Health center has selected and implemented a formal model for CQI (e.g. Plan, Do, Study, Act (PDSA), LEAN, Six Sigma, etc.). The CQI model includes both clinical and non-clinical arenas and engages staff from all levels of the organization in defining and implementing initiatives."
- A self-assessment of **7-9** indicates "Health center has developed an identity as a "learning" or CQI organization. QI measures are regularly shared with team members, leadership, and staff. Health center has institutionalized support for quality improvement, such as robust data and information systems and analysis to inform improvement processes, expectations of leadership staff to lead and support improvement efforts, and coaching (external or internal) to address implementation barriers."

The health center has knowledge and experience with quality improvement.	1	2	3	4	5	6	7	8	9
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Question 26 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center routinely assesses and analyzes its target population, as defined by its internal patient population data, payer/provider network attribution/assignment data, or other sources. Health center routinely collects patient input via patient satisfaction surveys conducted and analyzed at regular intervals."
- A self-assessment of **4-6** indicates "Effective mechanisms are in place to reach out and help patients feel connected to the health center providers and/or other care team members if those relationships do not already exist. Health center has a robust system for assessing patient experience (i.e. patients are meaningful partners in providing feedback via advisory/focus groups, etc.)"
- A self-assessment of **7-9** indicates "Health center has an established feedback loop to incorporate patient input into CQI activities, and this loop is communicated with patients. Health center uses patient experience and engagement metrics such as the Patient Activation Measure and Consumer Assessment of Healthcare Providers and Systems (CAHPS) to improve care."

The health center has a clear understanding of its patient population.	1	2	3	4	5	6	7	8	9
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Question 27 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "All service delivery sites participate in disease collaboratives. Lessons learned and best practices are shared across the organization. Specific disease conditions are included in CQI efforts on an ongoing basis. Health center identifies complex patients informally or through chart review."
- A self-assessment of **4-6** indicates "Health center uses disease registries to categorize sub-populations by clinical priorities. Health center engages in regular and continuous management of patient visits for specific chronic conditions. Disease registries support automatic prompts and reminders about services."
- A self-assessment of **7-9** indicates "Health center uses formal models including evidence-based practices to improve outcomes of complex patients. Model of care may include a team-based approach to systematic preventive, follow-up, planned, and group visits for chronic care."

The health center addresses quality of care for patients with complex needs (e.g. chronic conditions) and utilization patterns.	1	2	3	4	5	6	7	8	9
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Question 28 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has aggregate data on the insurance and socio-economic status of its own population. This data is examined infrequently, typically in preparation for Uniform Data System (UDS) reporting."
- A self-assessment of **4-6** indicates "Health center has the workforce capacity to regularly examine both internal and external data regarding the insurance and socio-economic status of both its own patients and residents of the service area, including an analysis of trends over time."
- A self-assessment of **7-9** indicates "Health center staff regularly applies socio-economic data regarding the needs of populations targeted by specific payment reform efforts."

The health center regularly uses data to understand the socio-economic characteristics of population in service area.	1	2	3	4	5	6	7	8	9
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Question 29 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has data on the primary health conditions of its own patient population. Health center has analyzed health needs of specific populations (age, gender, and race/ethnic groups) within its patient population."
- A self-assessment of **4-6** indicates "Health center is aware of broader health needs and utilization patterns in service area, including behavioral and oral health needs, comorbidities, and primary prevention needs (e.g. smoking and obesity rates, etc.)."
- A self-assessment of **7-9** indicates "Health center has a thorough understanding of specific health needs and utilization patterns of the population based on its own data serving the patient population and information available from other provider groups and/or published literature."

The health center regularly uses data to understand the specific health needs of population in its service area.	1	2	3	4	5	6	7	8	9
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Question 30 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center regularly examines its penetration rate for its target market segments (i.e. low-income, uninsured). Health center has gathered data on other community providers serving the same patient population and their penetration rates."
- A self-assessment of **4-6** indicates "Health center analyzes penetration into the service area/target population for a specific initiative. Health center understands the specialty and hospital referral patterns of its current and potential patients."
- A self-assessment of **7-9** indicates "Health center is able to improve its market penetration in its service area using data. The health center understands its untapped demand within service area for specific services; for populations in the context of major competitors and their market share."

The health center uses data to understand its role within the broader health care marketplace and its market share.	1	2	3	4	5	6	7	8	9
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Question 31 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center uses practice management and health records data to quantify current capacity and the need for any additional capacity."
- A self-assessment of **4-6** indicates "Health center applies practice management data to optimize existing capacity (using providers to full extent of license; expanding facility hours, etc.)."
- A self-assessment of **7-9** indicates "Health center uses practice management and health records data from internal and external sources to inform, plan, and engage in transformation efforts. These data may include potential impact on current demand, staffing mix or space needs that are different than those historically used."

The health center uses data to understand its current capacity in terms of workforce and physical plant.	1	2	3	4	5	6	7	8	9
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Question 32 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center's systems are able to capture unique encounters, services provided, utilization and diagnosis. The system readily produces reports on encounters, utilization and diagnoses in the aggregate, but it is not readily accessible in real-time. Health center is able to produce and submit accurate and timely reports reflecting performance indicators tied to quality or other funding."
- A self-assessment of **4-6** indicates "Health center's systems are able to capture and report on unique encounters, services provided, utilization and health outcomes for specific groups of patients (e.g. age, lab results, chronic conditions, dual eligibles, high utilizers, etc.). Health center's systems capture and produce reports on patient social determinants of health, including environmental factors (health habits; mental health; patient perspective and preferences and communication modalities; risk assessments)."
- A self-assessment of **7-9** indicates "Health center information systems capture and report on non-traditional "touches" such as email, phone call, group visits for diabetes management and prenatal care, etc. and enabling services. Health center information systems capture and report on non-traditional "touches" such as remote monitoring devices/wearables, virtual reality and/or other internet of things (iot) devices. Health center information systems enable care teams to securely exchange real-time tracking and service data such as event notification with delivery system partners (including hospitals, specialists, payers, public health, social services, law enforcement, emergency, and other health-related entities). Health center is able to leverage cost and utilization data available from partners for performance improvement."

The health center's health information technology (HIT) systems allow for tracking of client and service information needed to support care and payment transformation.	1	2	3	4	5	6	7	8	9
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Question 33 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center participates in some population-wide, information exchange networks such as those related to IPAs, MCOs, and/or health information exchanges."
- A self-assessment of **4-6** indicates "Health center uses data exchanged via the information exchange networks to inform service model and payment transformation efforts."
- A self-assessment of **7-9** indicates "Robust health information exchanges allow the health center to exchange data with other care providers and payers in real time. Information exchange networks collectively assess aggregate data to address health disparities, support value/return on investment studies and inform other policy, payment, and system-wide transformation efforts to improve population health while reducing the total cost of care."

The health center's health information technology (HIT) systems allow for use of internal and external data to support population health management.	1	2	3	4	5	6	7	8	9
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Question 34 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health center has not independently analyzed legal and/or compliance implications of specific payment reform initiatives. Any analysis has been provided by partners and/or sponsors of payment reform initiatives."
- A self-assessment of **4-6** indicates "Health center has identified legal/ compliance issues related to specific payment reform initiatives, including anti-trust issues, governance requirements, maintenance of PPS payment protections, organizational liability and FTCA issues."
- A self-assessment of **7-9** indicates "Health center has ensured internal expertise is adequate to address identified issues, or has contracted with external expertise as needed."
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The health center has secured appropriate legal and compliance expertise for payment reform activities.	1	2	3	4	5	6	7	8	9
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Question 35 of 35

Indicate on a scale of 1 - 9 your organization's level of readiness and competency in this area.

- A self-assessment of **1-3** indicates "Health Center is informally involved in tracking value-based care and payment related policy through newsletter subscriptions, meetings, and other sources of information"
- A self-assessment of **4-6** indicates "Health Center is aware of policy efforts through formal channels such as PCA membership and formal participation in other organizations."
- A self-assessment of **7-9** indicates "Health Center has a lead role in helping to shape state-level payment reform through participation in advisory groups, coalitions, and committees related to value-based care and payment. Health Center participates in national and state-level efforts to gain a broader understanding of value-based care and payment reform efforts. The BOD supports policy efforts (including health center and PCA activities) to shape state-level payment reform."

The Health Center understands the implications of policies that impact efforts regarding value-based payment and care.	1	2	3	4	5	6	7	8	9
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