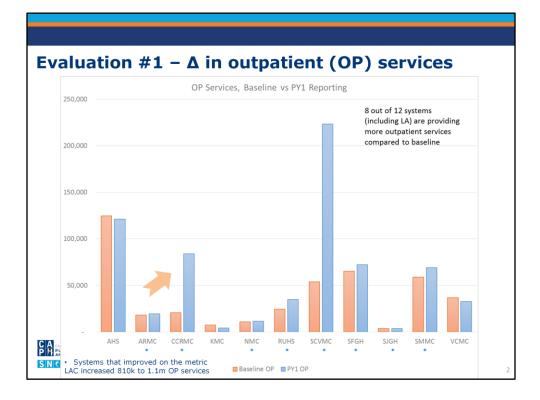


There will be two GPP evaluations, one at mid-program (Evaluation #1) and one at program end (Evaluation #2). In this packet, we've included a subset of metrics from the proposed GPP evaluations to show directionality of the data. In the notes section for each slide, you will find the language from the proposed evaluation that describes the metric displayed, as well as any other description of the metrics that's available.

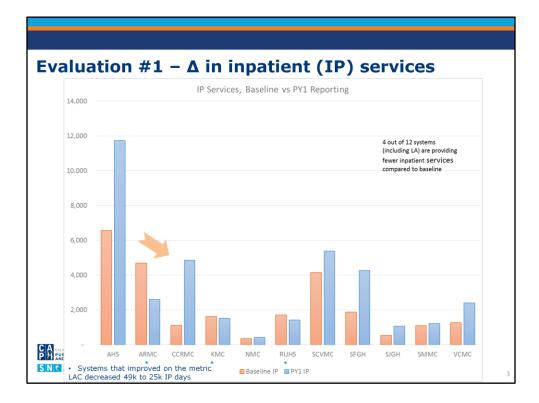


Evaluation language: Compare baseline data to subsequent GPP program years to analyze the GPP trends and utilization in the following categories: Ambulatory care services from Categories 1, 2 and 3 (excluding behavioral health and emergency services) in Table 1 of Attachment FF (e.g. primary and specialty care, nutrition education, group visits)

Desirable trend = increase in outpatient services

OP services include: Outpatient and non-traditional Services in physical health. Does not include BH services. There are no non-traditional services in baseline, however there are non-traditional services in PY1.

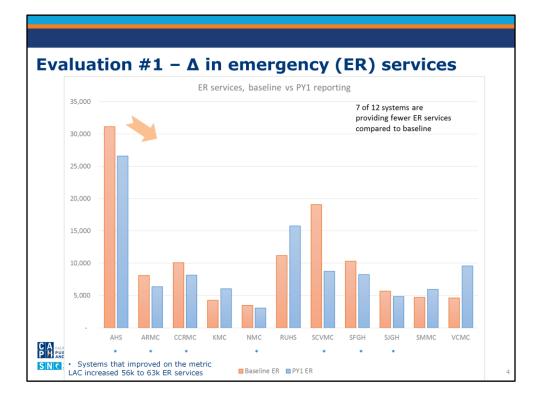
Metric looks at utilization only, and does not assign different values to different types of ambulatory services (i.e., an OP surgery visit and methodone visit are not valued differently, even though they are worth different GPP points).



Evaluation language: Compare baseline data to subsequent GPP program years to analyze the GPP trends and utilization in the following categories: Inpatient from Category 4 in Table 1 of Attachment FF (e.g. trauma, med surg)

Desirable trend = decrease in inpatient services

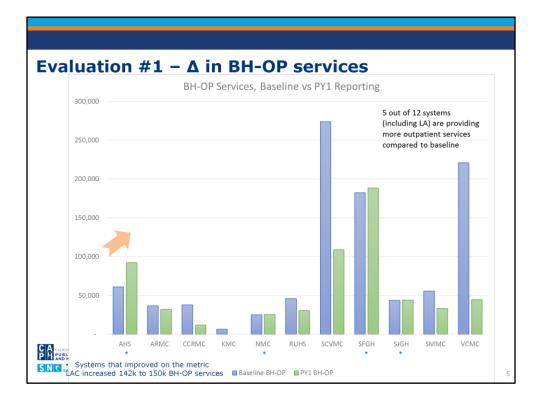
IP services include: Any day services, excluding BH IP and day services. Metric does not differentiate between acute and subacute days.



Evaluation language: Compare baseline data to subsequent GPP program years to analyze the GPP trends and utilization in the following categories: Emergency services from Category 1C in Table 1 of Attachment FF

Desirable trend = decrease in ER services

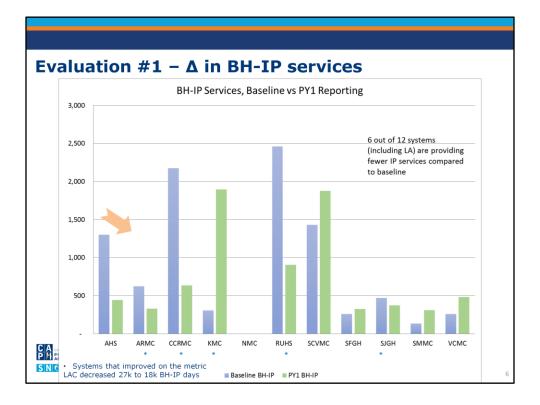
ER services includes both PHS delivered and contracted ER.



BH = Behavioral Health

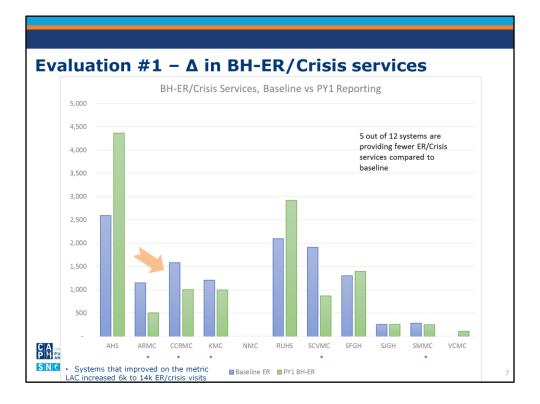
Evaluation language: Compare baseline data to subsequent GPP program years to analyze the GPP trends and utilization in the following categories: Behavioral health services in Category 1B, 1C and 4A and 4B in Table 1 of Attachment FF (particularly in the non-emergent settings, e.g. mental health and substance use outpatient)

Desirable trend = increase in outpatient services



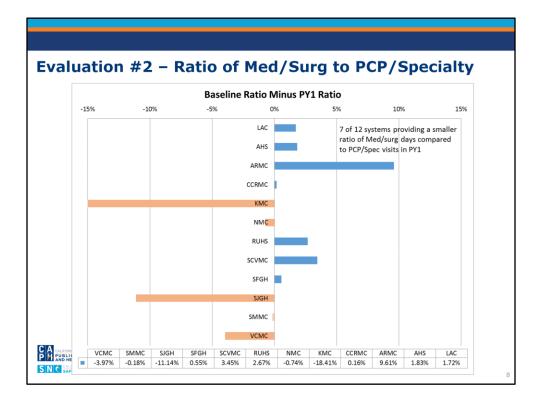
Evaluation language: Compare baseline data to subsequent GPP program years to analyze the GPP trends and utilization in the following categories: Behavioral health services in Category 1B, 1C and 4A and 4B in Table 1 of Attachment FF (particularly in the non-emergent settings, e.g. mental health and substance use outpatient)

Desirable trend = decrease in inpatient services



Evaluation language: Compare baseline data to subsequent GPP program years to analyze the GPP trends and utilization in the following categories: Behavioral health services in Category 1B, 1C and 4A and 4B in Table 1 of Attachment FF (particularly in the non-emergent settings, e.g. mental health and substance use outpatient)

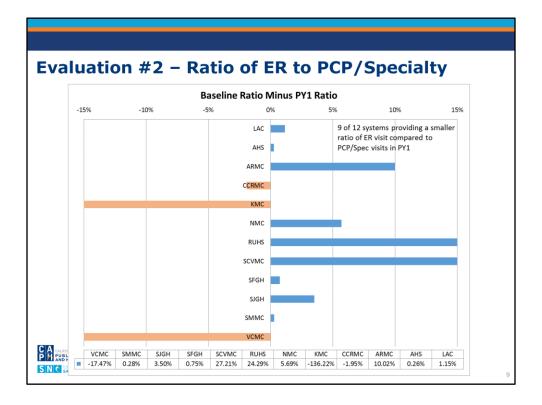
Desirable trend = decrease in ER services



Evaluation language: Assess changes in care to more appropriate settings which could include:

• Changes in the ratio of Inpatient Care to Ambulatory Care: Numerator: Number of inpatient Med/surg days/year Denominator: Number of primary care and specialty encounters/year

Desirable trend = Ratio should get smaller over time; Baseline ratio minus PY1 ratio should be positive (blue)

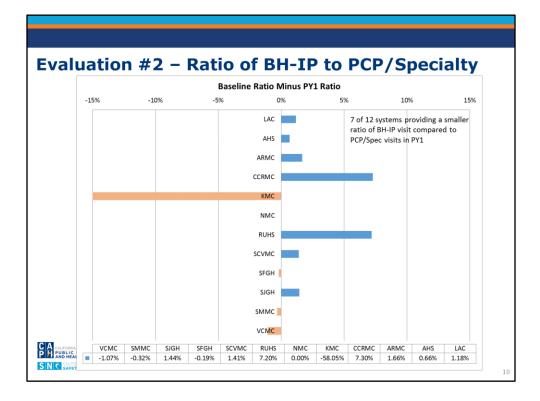


Evaluation language: Assess changes in care to more appropriate settings which could include:

• Changes in the ratio of Emergency Care to Ambulatory Care: Numerator: Number of ER encounters/year Denominator: Number of primary care and specialty care encounters/year

(Does not include contracted ER services, which is usually a calculated value based on the amount of Maddy funds counties have collected to spend on uninsured ER services.)

Desirable trend = Ratio should get smaller over time; Baseline ratio minus PY1 ratio should be positive (blue)



Evaluation language: Assess changes in care to more appropriate settings which could include:

• Changes in the ratio Inpatient Behavioral Health Services to outpatient non-emergent services

Numerator: Number of mental health and substance days/year Denominator: Number of primary care and specialty care encounters/year

(Number of mental health and substance days includes BH-IP days, and does not include residential and other days)

Desirable trend = Ratio should get smaller over time; Baseline ratio minus PY1 ratio should be positive (blue)

GPP - PY 1 Initial Trends - Percent of Points Earned by Service Category (as of 5/16/17)

Desirable trends:

Outpatient and Non-Traditional Increase Compared to Baseline Inpatient and ER Decrease Compared to Baseline

System	Services	Year	ОР	NT	IP	ER	Total
LAC	Physical Health	Baseline	57%	0%	35%	9%	100%
		PY1	67%	8%	17%	8%	100%
	Behavorial Health	Baseline	34%	0%	57%	10%	100%
		PY1	37%	0%	40%	22%	100%
	Total	Baseline	53%	0%	38%	9%	100%
		PY1	63%	7%	20%	10%	100%
AHS	Physical Health	Baseline	51%	0%	23%	26%	100%
		PY1	59%	5%	12%	23%	100%
	Behavorial Health	Baseline	65%	0%	14%	21%	100%
		PY1	63%	6%	4%	27%	100%
	Total	Baseline	53%	0%	21%	25%	100%
		PY1	60%	6%	11%	24%	100%
ARMC	Physical Health	Baseline	23%	0%	56%	21%	100%
		PY1	47%	0%	34%	18%	100%
	Behavorial Health	Baseline	65%	0%	15%	20%	100%
		PY1	79%	0%	10%	11%	100%
	Total	Baseline	31%	0%	48%	21%	100%
		PY1	53%	0%	30%	17%	100%
CCRMC	Physical Health	Baseline	52%	0%	20%	29%	100%
		PY1	29%	46%	9%	16%	100%
	Behavorial Health	Baseline	44%	0%	37%	19%	100%
		PY1	48%	0%	24%	28%	100%
	Total	Baseline	49%	0%	26%	25%	100%
		PY1	32%	39%	11%	18%	100%
КМС	Physical Health	Baseline	40%	0%	37%	23%	100%
		PY1	25%	1%	38%	35%	100%
	Behavorial Health	Baseline	37%	0%	16%	47%	100%
		PY1	0%	0%	72%	28%	100%
	Total	Baseline	39%	0%	34%	27%	100%
		PY1	19%	1%	46%		100%
NMC	Physical Health	Baseline	59%	0%	13%	28%	100%
		PY1	61%	0%	15%	24%	100%
	Behavorial Health	Baseline	100%	0%	0%	0%	100%
		PY1	100%	0%	0%	0%	100%
	Total	Baseline	72%	0%	9%	19%	100%
		PY1	74%	0%	10%	16%	100%
RUHS	Physical Health	Baseline	45%	0%	21%	34%	100%
		PY1	51%	1%	17%	31%	100%
	Behavorial Health	Baseline	51%	0%	30%	19%	100%
		PY1	45%	0%	16%	39%	100%
	Total	Baseline	47%	0%	24%	29%	100%
		PY1	49%	1%	17%	33%	100%

System	Services	Year	ОР	NT	IP	ER	Total
SCVMC	Physical Health	Baseline	50%	0%	25%	24%	100%
		PY1	58%	19%	16%	8%	100%
	Behavorial Health	Baseline	87%	0%	6%	6%	100%
		PY1	75%	0%	18%	6%	100%
	Total	Baseline	65%	0%	18%	17%	100%
		PY1	61%	15%	16%	7%	100%
SFGH	Physical Health	Baseline	70%	0%	13%	17%	100%
		PY1	62%	10%	15%	14%	100%
	Behavorial Health	Baseline	89%	0%	2%	8%	100%
		PY1	88%	0%	3%	9%	100%
	Total	Baseline	76%	0%	10%	15%	100%
		PY1	69%	7%	11%	13%	100%
SJGH	Physical Health	Baseline	24%	0%	23%	53%	100%
		PY1	18%	1%	42%	39%	100%
	Behavorial Health	Baseline	84%	0%	12%	5%	100%
		PY1	86%	0%	9%	5%	100%
	Total	Baseline	51%	0%	18%	31%	100%
		PY1	47%	0%	28%	25%	100%
SMMC	Physical Health	Baseline	81%	0%	9%	10%	100%
		PY1	73%	8%	9%	10%	100%
	Behavorial Health	Baseline	93%	0%	3%	4%	100%
		PY1	88%	0%	7%	4%	100%
	Total	Baseline	83%	0%	8%	9%	100%
		PY1	75%	7%	8%	9%	100%
VCMC	Physical Health	Baseline	76%	0%	14%	10%	100%
		PY1	51%	4%	26%	20%	100%
	Behavorial Health	Baseline	97%	0%	3%	0%	100%
		PY1	89%	0%	10%	2%	100%
	Total	Baseline	84%	0%	10%	6%	100%
		PY1	59%	3%	22%	16%	100%
Total	Physical Health	Baseline	56%	0%	29%	15%	100%
		PY1	61%	9%	17%	12%	100%
	Behavorial Health	Baseline	63%	0%	27%	10%	100%
		PY1	58%	1%	24%	18%	100%
	Total	Baseline	57%	0%	29%	14%	100%
		PY1	61%	8%	18%	13%	100%

GPP - PY1 Non-Traditional Services Reported by System

Non-Traditional Services		LAC	AHS	ARMC	CCRMC	KMC	NMC	RUHS	SCVMC	SFGH	SJGH	SMMC	VCMC	Total
Come has Others Lineared on Contified	RN-only visit	х	х		х				х	х	х	х	х	8
Care by Other Licensed or Certified Practitioners	PharmD visit		х			х		х	х	х	х	х	х	8
Practitioners	Complex care manager				х			х		х				3
Preventive health, education and patient support services	Wellness													0
	Patient support group				х	х				х				3
	Community health worker				х				х			х		3
	Health coach												х	1
	Panel management									х				1
	Health education		х						х	х	х	х	х	6
	Nutrition education		х						х	х	х		х	5
	Case management	х	х		х	х		х	х	х		х	х	9
	Oral hygiene				х			х	х					3
	Group medical visit		х		х				х		х	х		5
Chronic and integrative care	Integrative therapy		х		х					х				3
services	Palliative care							х					х	2
1	Pain management													0
	Home nursing visit	х						х	х	х			х	5
Community-based face-to-face	Paramedic treat and release				х									1
encounters	Mobile clinic visit							х				х		2
	Physician home visit				х			х	х			х		4
	Texting										х			1
Non-provider care team telehealth	Video-observed therapy													0
Non-provider care team telenealth	Nurse advice line				х				х	х		х		4
	RN e-Visit													0
eVisits	Email consultation with PCP				х				х					2
	Telehealth (patient - provider) - Store &													
	Forward								х	х	х	х	х	5
Store and forward telehealth	Telehealth (provider - provider) – eConsult /													
	eReferral	х								х				2
	Telehealth – Other Store & Forward							х						1
Real-time telehealth	Telephone consultation with PCP				х				х	х		х		4
	Telehealth (patient - provider) - real time				x								x	2
	Telehealth (provider - provider) - real time													0
Residential, SNF, and other	Sobering center days		x							x				2
recuperative services, low intensity	Recuperative / respite care days		х		x				x	x				4

as of 5/16/2017