

REQUEST FOR INFORMATION: Innovation in Perinatal and Child Health in Medicaid

The Institute for Medicaid Innovation (IMI) is leading a project to systematically identify initiatives that can be used to effectively leverage the Medicaid program to improve health equity and perinatal and child health outcomes. The final report will provide state Medicaid agencies and other Medicaid stakeholders examples of emerging best practices and innovative initiatives that can be used to support policy changes that have the potential to improve outcomes.

A National Advisory Committee consisting of representatives from Medicaid health plans and national experts in perinatal and child health, Medicaid policy, and health equity will review and score blinded submissions to identify the emerging best practices and innovative initiatives for inclusion in the final report. Before the final report is publicly released in March 2023, those selected for inclusion will have an opportunity to review and approve content highlighting their initiative before publication.

Medicaid managed care organizations (MCOs) or accountable care organizations (ACOs) with financial risk and delegated activities under the Medicaid program are encouraged to submit initiatives in partnership with community-based organizations and/or state Medicaid agencies. Multiple submissions representing multiple initiatives in different markets or at the national level will be accepted. Please note that each submission must have its own completed form.

Completion of this form is due November 18th, 2022. Email completed forms to NNimako@MedicaidInnovation.org.

Please select one or more perinatal/child phase(s) addressed by the initiative:

This work is supported by a grant from the Pritzker Children's Initiative.		
Name of Primary Contact Person:	Email: Phone:	
Name of Secondary Contact Person:	Email: Phone:	
Organization:	Position:	
Type of organization (e.g., Medicaid MCO, ACO, etc	. .):	
Section 1 – Category of Initiative		

Prenatal

Birth/delivery

Postpartum

Newborn/infant to age 1

Toddler ages 1 to 3



Please select one or more categories that best apply to the initiative:

Models that Support Continuum of Care (e.g., mental health, integrated home visitation, etc.)

Expansion or Diversification of Care Team Members (e.g., midwives, community health workers, doulas, peer navigators, etc.)

Parent-Child Dyadic Care (i.e., serving infant/toddlers + parents together)

Place-Based Programs (e.g., birth centers, mobile health clinics, etc.)

Strategies Focused on Equity, Inclusion, and Justice

Community-Based System Integration

Measurement Initiatives or Performance Improvement Projects (PIP) Focused on the Perinatal and Early Childhood Population

Value-Based or Alternative Payment Models

Covered Benefit Enhancement (e.g, doula services)

Expanded Medicaid Enrollment/Coverage

Added Financing for Providers or Perinatal and Early Childhood Services under State Plan Amendments (SPAs), Waivers, or Plan-Specific Efforts (e.g., group prenatal care, infant/early childhood mental health)

Other, list:

Section 2 – Background and Overview

Overview of Initiative

Name of initiative or model of care (if applicable):

Location(s) of initiative/model of care (i.e., city/state):

Provide the initiative's key dates:

- Start date:
- Completion of initial cycle (if applicable):
- Full initiative completion date (if applicable):
- 1. Describe the demographics of those targeted and reached by the initiative including age, race/ethnicity, primary language, gender identity, etc. (50 words)



2.	Provide a summary of the initiative or model of care. In	nclude information about partner
	organizations, if applicable. (200 words)	

3. Describe the driving factor(s) or influences that led to the design of this initiative or model of care. This could include a triggering event, input from patients/clients, a theory of change, state requirement or incentive, and/or research findings. (150 words)



Section 3 – Population, Process and Outcomes

4. Describe the context and needs of the community in which the initiative was undertaken. (100 words)

5. How were Medicaid enrollees, families, community members, or other interested parties involved in informing, guiding, and participating in this initiative? (100 words)



6.	What were the outcomes or expected outcomes, both quantitative and/or qualitative, from this initiative? (150 words)
Sec	tion 4 – Innovation, Impact, and Sustainability
7.	Innovation. In what way, if any, is this initiative or model of care an emerging best practice and/or innovative? (100 words)
8.	Implementation . What have been the implementation successes, if any, including obstacles overcome? (100 words)



9.	Equity. In what ways, if any, is the initiative expected to address equitable access to health care, community environment, and/or outcomes for perinatal/birthing individuals, young children, and their families? (100 words)
10.	Scale & Replicability. If applicable, briefly describe how the initiative can or has been expanded or replicated to have more impact? (100 words)
111	Sustainability . Describe what is needed to support the long-term sustainability of this initiative including community and organizational capacity, policy challenges at the county, state, or federal level, funding, and continuation of benefits. (100 words)



12. Learning. What lessons have been learned? What advice would you give to those who want to implement a similar initiative? (100 words)