

For projects to be considered for inclusion in the Medicaid Transformation Project List, please provide the information requested in the template. We are looking for summarized information – **2-3 pages maximum per project**.

Please email completed templates by **January 15, 2016**, to MedicaidTransformation@hca.wa.gov with the subject **Medicaid Waiver Project**. Thank you for your interest and support.

Contact Information	<i>Identify point person, telephone number, e-mail address:</i> Marilyn Van Oostrum, NFP Director, Children’s Village, (509) 574-3200, marilynvanoostrum@yvmh.org <i>Which organizations were involved in developing this project suggestion?</i> Greater Columbia Accountable Community of Health
Project Title	<i>Title of the project/intervention:</i> Nurse Family Partnership (NFP)
Rationale for the Project	
<p><i>Include:</i></p> <ul style="list-style-type: none"> • <i>Problem statement – why this project is needed.</i> The Yakima County Nurse Family Partnership program targets low-income first-time mothers, Hispanic and Native American adolescent mothers and other at-risk, first-time mothers in Yakima County (population 247,687) a rural, geographically isolated, culturally diverse, economically disadvantaged region. The 2009 Washington State Home Visiting Needs Assessment identifies Yakima County as the third most at-risk county in Washington State, with persistent and disproportionately poor maternal/infant health, socioeconomic, crime and substance abuse indicators, a higher percentage of teenage mothers (12.5 per 1,000 females 10 to 17 years compared to 5.1) and a lower percentage of high school graduates (73.9% compared to 90.1%). The Washington State Home Visiting Needs Assessment found that Hispanic mothers were more likely to be at risk for most need indicators, including late or no prenatal care and preterm birth. More than half (61.9%) of Yakima County births in 2010 were to Hispanic women. The Native American population was identified by the Washington State Home Visiting Needs Assessment as a population group with higher rates for all home visiting need indicators. With 269 births to Native American women in 2010, Yakima County has more births to Native American women than any other county in Washington State. Yakima County is composed of primarily rural communities (14 cities and towns) in Central Washington and the population is 48% Hispanic. Yakima County is an agricultural region and is home to over 75,000 migrant and seasonal farmworkers and their dependents, by far the highest concentration in Washington State (27%). Yakima County has higher rates of poverty than Washington State (24% vs 13%). On the Yakama Indian Reservation, nearly one third of individuals live below 100% of the Federal Poverty Level and 98% of students qualify for free or reduced lunch rates. (U.S. Census Bureau, 2014) • <i>Supporting research (evidence-based and promising practices) for the value of the proposed project.</i> According to the Coalition for Evidence-Based Policy, Nurse Family Partnership (NFP) has been shown in three randomized, controlled trials to achieve “sizable, sustained effects on important child and maternal outcomes.”¹ The NFP National Service Office reports indicate that of all the NFP programs in Washington State, the Yakima County program serves the highest proportion of new mothers under 15 years of age (5.3% vs. 3.5% statewide). Yakima County NFP targets low-income first-time mothers generally, but specifically targets Hispanic and Native American mothers, teenage mothers, mothers with lack of social support, non-English speaking mothers, and those in rural areas. Program data bear out that the Yakima County NFP is able to successfully reach these populations, recruit them into services, and retain them in services. Hispanic and Native American first-time mothers and their families currently make up 66% and 11% respectively of Yakima NFP caseload. The Yakima County NFP program demonstrates capacity and success in serving Hispanic and Native American clients and families, because 50% of the nursing staff and the nurse supervisor are fluently 	

¹ Nurse-Family Partnership. Coalition for Evidence-Based Policy. <http://toptierevidence.org/programs-reviewed/interventions-for-children-age-0-6/nurse-family-partnership>

bilingual (English/Spanish).

- *Relationship to federal objectives for Medicaid with particular attention to how this project benefits Medicaid beneficiaries. The project will: 1) increase access to, stabilize, and strengthen provider networks available to serve Medicaid and low-income populations through linkage to county resources for child development, education and screening, resources for counseling and parenting skills, and resources for high school graduation and employment for mothers; 2) improve health outcomes for Medicaid and low-income populations through linkage to primary care providers, developmental screening, and early health interventions; and 3) increase the efficiency and quality of care for Medicaid and other low-income populations through initiatives to transform service delivery networks.*

Project Description

Which Medicaid Transformation Goals are supported by this project/intervention? Check box(es)

- Reduce avoidable use of intensive services**
- Improve population health, focused on prevention**
- Accelerate transition to value-based payment**
- Ensure Medicaid per-capita growth is below national trends**

Which Transformation Project Domain(s) are involved? Check box(es)

- Health Systems Capacity Building**
- Care Delivery Redesign**
- Population Health Improvement – prevention activities**

Describe:

- *Region(s) and sub-population(s) impacted by the project. Include a description of the target population (e.g., persons discharged from local jail facilities with serious mental illness and or substance use disorders). **Yakima County (population 247,687) is composed of primarily rural communities (14 cities and towns) in Central Washington. The population is 48% Hispanic, with over 75,000 migrant and seasonal farmworkers and their dependents, and the county has higher rates of poverty than Washington State (24% vs 13%). Yakima County NFP targets low-income first-time mothers generally, but specifically targets Hispanic and Native American mothers, teenage mothers, mothers with lack of social support, non-English speaking mothers, and those in rural areas of Yakima County. Hispanic and Native American first-time mothers and their families currently make up 66% and 11% respectively of Yakima NFP caseload.***
- *Relationship to Washington’s Medicaid Transformation goals. The project will: 1) Reduce avoidable use of intensive services and settings and decrease hospital admission, length of stay, and readmission through linkage to primary care, developmental screening, and preventive health programs; 2) Accelerate the transition to value-based payment (payment model 2, encounter-based to value-based) through prevention and early intervention efforts; and 3) Ensure that Medicaid per-capita cost growth is two percentage points below national trends as the benefit to cost ratio of home visiting for Nurse Family Partnership is \$1.67.²*
- *Project goals, interventions and outcomes expected during the waiver period, including relationship to improving health equity /reducing health disparities. The goal is to increase Nurse Family Partnership home visiting services in the Greater Columbia RSA region. Nurse Family Partnership Program reaches those who are eligible to receive Temporary Assistance for Needy Families (TANF). Nurses make home visits to support healthy child development, provide specialty screenings for early intervention referral, enhance parenting skills, improve the quality of parent-child interactions, and promote school readiness activities for families at risk for child abuse, neglect and poor educational outcomes. Proposed outcomes include high quality service delivery, positive birth outcomes, high rates of breastfeeding, avoidance of child abuse and neglect and*

²<http://www.wsipp.wa.gov/BenefitCost?topicId=>

domestic violence, positive child development, and improved maternal education. Expected project outcomes include a reduction in potentially avoidable emergency department visits, the percent of patients with five or more visits to the emergency room without a care guideline, annual state-purchased health care spending growth relative to state GDP, Medicaid per enrollee spending, and inpatient utilization.

- *Links to complementary transformation initiatives - those funded through other local, state or federal authorities (such as the health home program and Early Adopter/Behavioral Health Organization regional purchasing) and/or Medicaid Transformation initiatives # 2 and 3. N/A*
- *Potential partners, systems, and organizations (e.g., health and social service providers, ACH participants) needed to be engaged to achieve the results of the proposed project. **The project will engage business, community- and faith-based, consumer, education, faith-based, food system, health care provider, hospital, housing, local government, philanthropy, public health, social services, transportation, and tribal organizations in the Greater Columbia RSA.***

Core Investment Components

Describe:

- **Proposed activities and cost estimates (“order of magnitude”) for the project. Nurses make home visits to support healthy child development, provide specialty screenings for early intervention referral, enhance parenting skills, improve the quality of parent-child interactions, provide referral to community and social support services, and promote school readiness activities for families at risk for child abuse, neglect and poor educational outcomes. The cost estimate is \$1,499,250 per year (150 participants x \$9,995 per participant.)**
- *Best estimate (or ballpark if unknown) for:*
 - **How many people you expect to serve, on a monthly or annual basis, when fully implemented. **Yakima County Nurse Family Partnership will serve approximately 150 first-time mothers per year.****
 - **How much you expect the program to cost per person served, on a monthly or annual basis. **The WSIPP estimates that Nurse Family Partnership home visiting for high-risk populations cost \$9,995 per participant per year.****³
- *How long it will take to fully implement the project within a region where you expect it will have to be phased in. **N/A***
- *The financial return on investment (ROI) opportunity, including estimated amounts and associated ROI timeline. **The WSIPP estimates that patient-centered medical homes for high-risk populations benefits minus costs (net present value) is \$6,705 per participant per year, and the estimated ROI is 67%.***⁴

Project Metrics

The state will monitor implementation of transformation projects at regional and statewide levels through process and outcome measures. Each project will require clearly defined outcomes that relate to the goals and specific process steps.

Wherever possible describe:

- *Key process and outcome measures (and specific benchmark performance data if known) against which the performance of the project would be measured. Include priority measures sets described in the Waiver application <http://www.hca.wa.gov/hw/Documents/waiverappl.pdf> pages 46-47. **Process measures will include the number of first-time mothers in the Greater Columbia RSA who receive care Nurse Family Partnership home visiting services. Outcomes measures will include potentially avoidable emergency department visits, percent of patients with five or more visits to the emergency room without a care guideline, annual state-purchased health care spending growth relative to state GDP, Medicaid per enrollee spending, and inpatient utilization.***
- *If no specific benchmark performance data are currently available, what efforts will be undertaken to establish*

³ <http://www.wsipp.wa.gov/BenefitCost?topicId=>

⁴ <http://www.wsipp.wa.gov/BenefitCost?topicId=>

benchmark performance ahead of any proposed project implementation? **County-level benchmark performance data are available for the Washington State Common Measure Set for Health Care Quality and Cost.**

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