



Altarum

2022 IMPACT REPORT



Ensuring Equitable Access to Quality Care

Our Mission in Action

Altarum is a nonprofit organization focused on improving the health of individuals with fewer financial resources and populations disenfranchised by the health care system. We work primarily on behalf of federal and state governments to design and implement solutions that achieve measurable results. We combine our expertise in public health and health care delivery with technology development and implementation, practice transformation, training and technical assistance, quality improvement, data analytics, and applied research and evaluation. Our innovative solutions and proven processes lead to better value and health for all.

Senior Management Group

MICHAEL MONSON

Chief Executive Officer,
President, and Trustee, Altarum

LESA LITTERAL

Executive Vice President
and Chief Administrative
Officer, Altarum

LAURA SANKEY

Executive Vice President
and Chief Strategy Officer,
Altarum

DENISE STURM

Executive Vice President
and Chief Financial Officer,
Altarum

TARA FOWLER

Vice President, Population
Health, Altarum

JASON YOUNG

President, Palladian Partners

ERIN TURNER

Vice President, Strategy,
Palladian Partners

SARAH BARTH

Executive Director,
Altarum Medicare-Medicaid
Services for States (AMMS)

Board of Trustees

GUY FISH

Chair; CEO and President,
Greater Lawrence Family
Health Center

JOSEPH FIFER

Vice Chair; President
and CEO, Healthcare Financial
Management Association

MELANIE BELLA

Head of Partnerships and
Policy, Cityblock Health;
Chair, MACPAC

LINDA ELAM

Managing Director,
Manatt Health

ROSEMARY GIBSON

Senior Advisor,
The Hastings Center

JENNIE CHIN HANSEN

Senior Strategic Advisor,
American Geriatrics Society

MICHAEL MONSON

Chief Executive Officer,
President, and Trustee, Altarum

THOMAS RANESE

Global Chief Marketing
Officer and Advisor

BRUCE C. VLADECK

Senior Advisor, Greater New
York Hospital Association and
LiveOnNY; Chairman Emeritus,
Medicare Rights Center

KELVIN WOMACK

Vice President for Diversity
and Inclusion, St. Jude
Children's Research Hospital

A MESSAGE FROM OUR CEO:

Forging a Healthier Future for All

“Dedication. Direction. Delivery.”

captures the meaningful impacts made by Altarum to improve the health of individuals with fewer financial resources and populations disenfranchised by the health care system.

As we work hand-in-glove with partners across federal and state agencies, as well as foundations and other key stakeholders, we are guided by our shared dedication to ensuring a future of better health for all. The stories in this impact report demonstrate the progress made by Altarum in 2022, as well as that made by our subsidiaries [Palladian Partners](#) and [Altarum Medicare-Medicaid Services for States \(AMMS\)](#).

We work in a rapidly changing health care landscape — one in which we must always be working to remain at the forefront of new channels of innovation, providing direction for policy implementation and progress. One of the most significant challenges currently faced by state Medicaid leaders is the unwinding of policies enacted in support of the COVID-19 public health emergency. In this report, we share how Altarum’s [proactive operational planning support](#) is helping states get ahead of this transition and ensure seamless health insurance coverage for Kentuckians.

Another emerging issue for states is the need for expanded capacity and expertise to improve care for dually eligible individuals. In response, we launched AMMS and developed a [policy roadmap](#) demonstrating how to include Dual Eligible Special Needs Plans. Altarum thought leaders also provided actionable strategies to [improve maternal and child health \(MCH\) outcomes by exploring public health and health care integration](#) — a perspective that our combined expertise in MCH, public health, and service delivery makes us uniquely positioned to offer.

Even as we explore new innovations, we continue to deliver impact in our foundational areas of focus. In 2022, we helped our clients make significant progress — from [addressing adolescent depression](#) in rural Michigan through our RAD-IT program to [identifying barriers to care for women Veterans](#) utilizing Veterans Health Administration services.

Our impact is vast. We created unified, forward-thinking messaging for the Eunice Kennedy Shriver National Institute of Child Health and Human Development’s [Safe to Sleep®](#) program to reduce Sudden Infant Death Syndrome, influenced new [water-shutoff protections in the city of Philadelphia](#), and advanced sexual health for all Americans through the [CDC-funded National Coalition for Sexual Health](#).

As Altarum continues to evolve, we are humbled by the expanding reach of our efforts, grateful for the opportunity to make a larger impact, and dedicated to continuing to deliver on our mission. Our dedication was demonstrated in 2022 through contract awards from the [Department of Health and Human Services](#) and [HL7 International](#), invitations to contribute [testimony](#) and [industry perspectives](#), and in October, [an award](#) from philanthropist MacKenzie Scott.

The impact Altarum was able to make in 2022 is due to our phenomenal team — a dynamic group of people rich in lived experiences and perspectives. As we continue to grow, we invite you to [join us](#) on this journey. We are confident that with our team, our supportive Board of Trustees, and our trusted partners, we will continue to advance our mission, push the boundaries of what is possible, and make a real difference in the lives of people and communities.



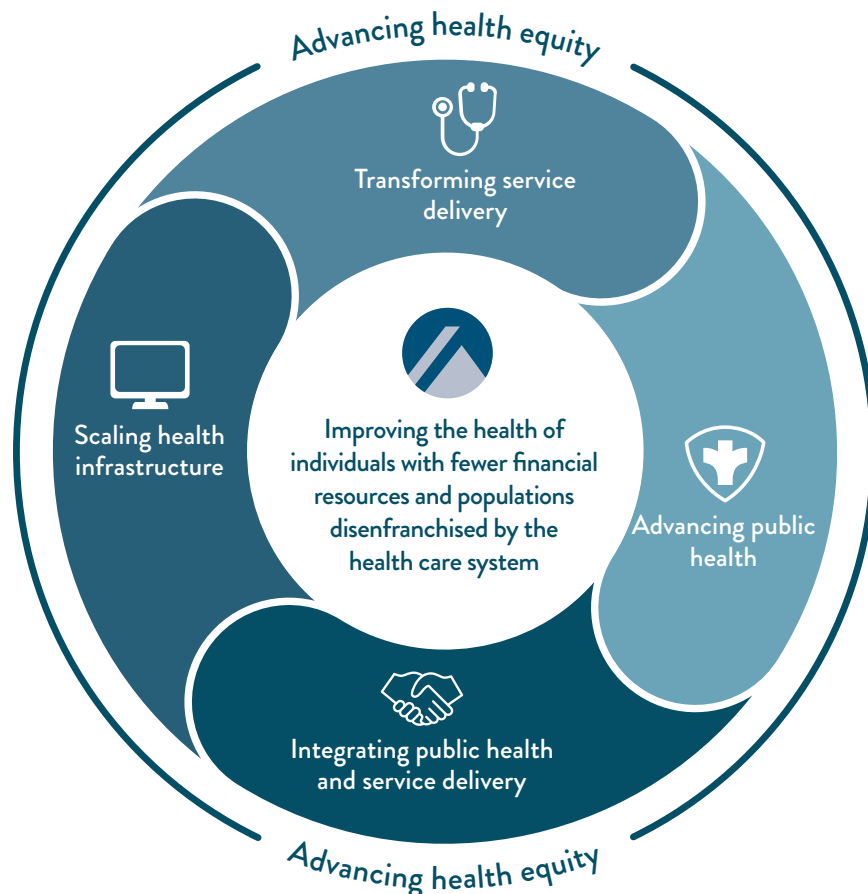
Michael Monson

CHIEF EXECUTIVE OFFICER,
PRESIDENT, AND TRUSTEE

OUR EXPERTISE

We Work Across the Health Ecosystem to Improve Care

We work across the health ecosystem, translating policy into practice to improve care and advance health equity. By combining our expertise in public health and service delivery with technology development and implementation, practice transformation, training and technical assistance, quality improvement, data analytics, and applied research and evaluation, we have measurable impact. The innovative solutions and proven processes we spearhead result in better value for our partners and better health for all.



Our Subsidiaries



A full-service strategic communications and marketing agency, Palladian Partners works on some of the toughest and most urgent issues in health and science.

AMMS

ALTARUM MEDICARE-MEDICAID
SERVICES FOR STATES

AMMS helps states create financially sustainable solutions to advance health, health equity, wellness, and independent living for dually eligible individuals.



TRANSFORMING SERVICE DELIVERY

Helping U.S. States Advance Health, Health Equity, Wellness, and Independent Living for Dually Eligible Individuals

Individuals who are enrolled in both Medicare and Medicaid—often referred to as dually eligible—are a diverse population. While they usually have lower incomes and little savings, they differ greatly in terms of demographic, socioeconomic, and health characteristics—comprising adults over age 65 with limited financial resources and diverse health and disability status, individuals with lifelong intellectual or developmental disabilities, and people under age 65 with significant physical or cognitive disabilities. Dually eligible individuals are more likely to report being in poor health than Medicare-only enrollees and nearly half report a limitation in their activities of daily living. They also encounter other difficulties such as housing instability and limited transportation. As a result of these myriad challenges, many rely on care and support that are fragmented across the Medicare and Medicaid programs.

Consequently, when it comes to providing care solutions for their dually eligible populations, states have an opportunity to both improve individuals' experiences through tailored plans and maximize public funding by increasing care coordination between the Medicare and Medicaid programs. [Altarum Medicare-Medicaid Services for States \(AMMS\)](#) offers states the expertise and support they need to accomplish these objectives.

Formed in 2022, AMMS is a nonprofit subsidiary of Altarum that helps states create financially sustainable solutions to advance health, health equity, wellness, and independent living for dually eligible individuals through Medicare-Medicaid integration. We enhance state capacity by providing exceptional national expertise around dual eligible and long-term services and supports (LTSS) policy and program administration. Our state-specific, data-driven approaches improve health equity and outcomes while efficiently managing Medicaid dollars.

Just as diverse dually eligible individuals require varied program approaches, AMMS tailors its services to meet states where they are on the continuum of knowledge, capacity, and expertise. We assess current situations and offer states phased-in approaches to integration to achieve person-centered care—from gaining Medicare proficiency to implementing fully integrated programs—including [transitioning to integrated dual eligible special needs plans \(D-SNPs\)](#).

AMMS' services span:

- Strategy and Program Design including data analysis of state dually eligible populations and identifying paths to improve care coordination and integration
- Administrative and Operational Support including direct project and program management and assisting states to use regulatory and contractual tools such as developing and operationalizing State Medicaid agency contracts with D-SNPs
- Communications including developing comprehensive internal and external communication plans, conducting stakeholder engagement meetings and regional forums, and managing state internal and external workgroups and relationships

While AMMS operates as a shared service between states, success is defined based on each state's individual goals. These may include improved quality and outcome measures, more dually eligible individuals living independently in their communities, increased cost efficiencies, and the wider availability of, and greater enrollment in, integrated programs.

AMMS, in service to states, is a hallmark of Altarum's ability to innovate solutions to advance health equity – to recognize a challenge and develop a customizable solution for states wherever they are on their journey to improving care for dually eligible individuals.



TRANSFORMING SERVICE DELIVERY

Helping Kentucky's Department for Medicaid Services Unwind the Public Health Emergency

With more than 15 million Medicaid enrollees with the potential to lose health care, the end of the public health emergency (PHE) and the national unwinding is the big story of 2023.

At the start of the COVID-19 pandemic, Congress enacted a requirement to keep individuals continuously enrolled in Medicaid programs through the end of the month of the emergency period. This requirement, bolstered by enhanced federal funding and added flexibilities, led to substantial growth in the number of Medicaid beneficiaries across all states.

With Medicaid enrollment activities set to resume as early as April 1, 2023, states are racing to develop plans to make certain eligible beneficiaries continue to receive coverage, while those who are no longer eligible transition to alternative health plan options.

It is a daunting administrative task for states with the potential to erase historic gains in expanding health care coverage—with children and people of color most likely to be affected. Yet some states, recognizing the need to get ahead of the PHE unwinding and Medicaid renewals, are taking proactive steps to soften the blow dealt by the loss of continuous eligibility.

In Kentucky, the Department for Medicaid Services (DMS) turned to Altarum for policy expertise, operational support, and expanded implementation capacity. We are partnering with DMS to help navigate this process to ensure a smooth transition and the optimization of coverage for all Kentuckians. Through our efforts, we are guiding DMS and key stakeholders in several important areas:

- Operational Planning – strategic planning to manage all activities and service changes across DMS and partner organizations for the PHE unwinding and Medicaid renewals
- Communications – developing and promoting uniform messaging for various audiences, such as Medicaid beneficiaries, providers, state staff, and advocacy organizations
- Training and Staff Readiness – coordinating across the state to ensure staff working directly with beneficiaries, and those at advocacy organizations, have what they need to avoid potential gaps in coverage
- System Readiness – ensuring that statewide provider and beneficiary enrollment and eligibility systems are refined and prepared for changes to requirements as policies revert to pre-pandemic status
- Policy Implementation – providing Medicaid and CMS policy expertise, as flexibilities allow, during the PHE unwinding period or as they are formally established through state-level policy changes
- Stakeholder Engagement – ongoing engagement efforts to support the transition back to normal operations

With the increased capacity and expertise provided by Altarum's support, states are better able to navigate complex policy considerations and waiver redesign while managing the shifting PHE unwinding timeline. More than that, our partnership with states helps to reduce gaps in coverage and ensure access to health care for those who need it most.

In Kentucky, more than 320,000 members are set to start the renewal process beginning in May 2023 — at least a quarter of whom are children. It's estimated that as many as 85,400 enrollees could lose eligibility and need to be connected with a qualified health plan. By partnering with Altarum, the state has taken a significant step toward ensuring that all those served by Medicaid, as well as the staff and organizations that support them, understand the upcoming unwinding and take the steps necessary to safeguard these individuals' access to health care.



TRANSFORMING SERVICE DELIVERY

Developing a Multi-Purpose Management Tool to Help States Address Direct-Care Workforce Shortages

The COVID-19 pandemic brought the value and vulnerability of those serving the nation's long-term care system into sharp relief. Direct-care workers, such as personal care and home health aides, were recognized as heroes as they performed the essential — and often dangerous — task of keeping older adults and people with disabilities safe and well cared for. Yet, even before the pandemic, the precarious state of this workforce was acutely clear, with low pay, difficulty recruiting and retaining workers, and a lack of standardized training and credentialing undermining the quality of care as well as workforce mobility and stability.


As the population of Americans 65 and older increases, states are struggling with the sizable difference between the number of individuals who qualify for Medicaid-financed long-term services and supports (LTSS) and the number of workers available to provide this care. These workforce shortages hinder a state's ability to rebalance its Medicaid population — by either transitioning individuals from nursing homes and assisted living facilities or prolonging their residence in the community — through the provision of essential home and community-based services (HCBS). Existing solutions being proposed to help states enhance recruitment, retention, and development strategies are often limited in their ability to understand real-time gaps and needs.

To overcome these constraints to addressing workforce shortages, Altarum partnered with [ADvancing States](#) to develop a comprehensive Direct Care Careers Center workforce management tool. The platform provides everything states need in a single workforce management tool: training and professional development resources, credentialing, job matching, peer support, and meaningful real-time data to guide planning and policymaking.

Using the Direct Care Careers Center platform, individual states are able to:

- Understand their state's current workforce by enabling a state-wide system
- Streamline the recruitment process among providers, individuals who direct their own care, and prospective workers by automatically matching talent bank profiles with job descriptions
- Provide access to training and professional development resources, including required state certification training(s) through the learning platform
- Build peer-to-peer support among workers through a collaboration forum
- Better manage their workforce and inform state workforce priorities through real-time data analytics and workforce dashboards

Drawing on more than a decade of experience developing and maintaining online resource and virtual training centers for clients such as [CMS](#) and [HRSA](#), Altarum developed the Direct Care Careers Center to allow extensive customization for different audiences and devices in order to meet state, employer, and worker needs. Among the center's many features are tools for job postings, advanced search capabilities for job seekers, simple online applications, training modules, discussion forums, and one-stop credentialing and licensure management.



TRANSFORMING SERVICE DELIVERY

Successfully Transforming Behavioral Health Care Delivery to Rural Adolescents Through Integration and Telemedicine

Altarum created the innovative [Responding to Adolescent Depression through Integration and Telemedicine \(RAD-IT\)](#) pilot program to improve the mental health outcomes of adolescents in rural Michigan. While depression is a serious public health issue that affects many adolescents across the U.S., unfortunately, it is often left untreated. The RAD-IT program is aimed to increase recognition of depression among Michigan adolescents in appointments with their primary care physician (PCP) as well as provide timely, effective treatment for those most at risk for mental health issues and those most likely to face significant barriers to accessing treatment services.

With funding from Michigan Health Endowment Fund and with partners in the Upper Midwest Telehealth Resource Center, the Michigan Center for Rural Health, and CISCO, Altarum embarked on a two-year program. This effort involved training 45 primary care and family clinicians across 15 practices to integrate behavioral health (BH) screening, treatment, and follow-up into their telehealth practices. The clinicians were trained to provide universal screening for depression among adolescents and on how to establish telehealth services connecting vulnerable youth to providers who specialize in adolescent mental health. Over the course of the program, Altarum and its partners trained 53 clinicians and practice staff, reaching more than 2,000 adolescents in rural areas of Michigan.

The program's impact was significant. The screening rates for adolescent depression increased from 28 percent at baseline to 72 percent post-training, and follow-up for adolescents with moderate to severe depression risk increased from 24 percent at baseline to 37 percent post-training. Most importantly, 64 percent of adolescents with mild to moderate depression risk who received follow-up appointments saw an improvement in their PHQ-A scores — a measure that assesses the severity of clinically significant symptoms of depressive disorders and episodes.

Clinician confidence in meeting the needs of adolescents experiencing depression increased from 54 percent at baseline to 96 percent post-training. In addition, clinician knowledge and comfort around prescribing antidepressants

for adolescents in need increased from 67 percent at baseline to 88 percent post-training.

The RAD-IT program's results show that PCPs can seamlessly integrate adolescent BH care into their practices, increase patient access to BH services, and improve patient outcomes. Clinicians found the BH specialist network to be one of the most useful elements of the program, demonstrating that a tele-behavioral health network is an important intervention for expanding access to care. All things considered, RAD-IT revealed that improving training and access to BH resources for PCPs is critical, especially considering the national behavioral health workforce shortage and the impact of COVID-19.

One clinician who participated in the program noted its effectiveness in demonstrating the role practitioners can play in addressing adolescent depression. "I began paying more attention to the mental health needs of my patients. Providing mental health services has never been my strength. I'd rather treat an infection any day. The RAD-IT program helped me realize the role I can play in identifying and treating depression in adolescents."

The RAD-IT program's success could be a model for other states and regions facing similar challenges. With the growing national mental health crisis, programs like RAD-IT are critical for expanding and improving adolescent behavioral health in rural areas and beyond.

Helping Small, Rural, and Underserved Practices Navigate Value-Based Reimbursement While Improving Patient Care

Small clinical practices, or those located in rural or underserved areas, play an important role in the health care landscape and are critical in addressing health disparities. However, these practices are often constrained by limited resources on the path to fulfilling regulatory requirements. In addition to financial strain, they also face significant capacity challenges due to staff turnover and technological limitations. As rural providers tend to serve populations that are older, poorer, and sicker than those in urban areas, they also rely more on Medicare and Medicaid reimbursements. Faced with these capacity constraints, these practices often find it challenging to navigate government payment programs aimed at improving the health of their patients.

With funding from the Centers for Medicare & Medicaid Services (CMS), Altarum led the creation of a resource and support center to simplify compliance with CMS requirements for such practices. The cornerstone of the Quality Payment Program for Small, Underserved, and Rural Support (QPP-SURS) was the [Quality Payment Program Resource Center®](#) website. After launching in 2017, this resource center provided clinicians across seven midwestern states (Michigan, Ohio, Minnesota, Wisconsin, Illinois, Indiana, and Kentucky) with free, self-paced tools and resources to help them successfully navigate the Quality Payment Program (QPP) within the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). It also connected clinicians directly with Altarum's experienced practice facilitators for hands-on, personalized support.

Through QPP, MACRA's aim is to help transition health care providers from fee-for-service to value-based care. To advance this effort, the Merit-based Incentive Payment System (MIPS) payment track combines legacy-quality reporting programs and an improvement category into a single new composite scoring and reporting system. Under MIPS, clinicians can receive positive, neutral, or negative adjustments to future Medicare payments based on their final score.

For small, rural practices operating on slim margins, the ability to proactively manage Medicare payments is crucial. To help these practices report information accurately and achieve their highest possible MIPS score, Altarum created [MIPScast®](#), a user-friendly Qualified Registry tool. We provided the tool at no cost to all SURS-eligible clinicians, enabling them to track their MIPS measures and improvement activities, compare their performance to national benchmarks and their peers, and directly submit program data to CMS.

Over the course of the five-year program, Altarum's practice facilitators engaged 31,664 health care providers across 16,640 practices to support their QPP success. To educate

the broader health care community and raise awareness of the resource center, we presented at more than 30 national and regional conferences and hosted more than 60 educational webinars. Over 2,100 clinicians registered for the QPP Resource Center portal, where we maintained a dedicated help desk to provide direct education, guidance, and real-time support. The results were affirming: Participants reported a 99 percent satisfaction rate with Altarum's services.

On February 15, 2022, CMS officially ended QPP-SURS. Altarum — having a deep understanding of the compliance difficulties faced by small, rural, and underserved practices, who have relied on exceptions offered by the Extreme and Uncontrollable Circumstances (EUC) hardship applications in the wake of the COVID-19 public health emergency — advocated for the extension of QPP-SURS. Such an extension would continue to provide the necessary tools and support to ensure the success of these practices in the MIPS program.

Altarum continues to offer health care providers technical assistance around QPP and MIPS, as well as perform on-site and remote security risk analyses to protect patient information through our commercial services program. We also produce a quarterly newsletter to keep practices up to date on the latest QPP and MIPS news and information. Additionally, our practice facilitators continue to offer no-cost, direct support to clinicians through various quality improvement programs; [Reframing Optimal Management of Pain and Opioids in Older Adults \(ROMPO\)](#), for instance, helps primary care providers (PCPs) effectively manage pain in older adults, and [Healthy Hearts for Michigan](#) assists rural PCPs in evaluating current workflows and establishing screening and treatment protocols for cardiovascular disease (CVD).



ADVANCING PUBLIC HEALTH

Helping FDA Inform Patients and Providers About Biosimilar Treatment Options

Biologic medicines are crucial in the treatment of cancer, genetic disorders, and other serious illnesses. Often, they are the only effective treatment option, but they're incredibly expensive (40% of all prescription drug spending), which can limit access. That is where biosimilars have a role.

Biosimilars are almost identical to their biologic medicine counterparts. They provide the same treatment benefits, but are largely misunderstood. Patients and providers both need information to understand these treatment options and the U.S. Food and Drug Administration's (FDA) approach in evaluating and regulating these medicines. The FDA turned to Palladian Partners.

From 2016 to 2022, Palladian worked with FDA's Center for Drug Evaluation and Research to design and implement two parallel campaigns—one focused on health care providers, and the other for patients and caregivers. These dynamic efforts took a “surround sound” approach, incorporating social media, stakeholder collaboration, advertising, and website development for the FDA.

The campaigns had to surmount important challenges—namely:

- How could the FDA best preserve its neutrality as a regulator?
- How could the FDA best address concerns and mistrust it might encounter among patients and the medical community?

Consider just one situation that the FDA understood many patients would encounter: it could take years for a patient to get on a successful treatment plan, and it could be their insurance company that first raises their awareness about biosimilars. Would such a switch be met with hope, hostility, or ambiguity?

Palladian took the view that clear and helpful information would empower patients, so we embraced plain language and eschewed jargon. We knew, for some, infographics and animated video would be more accessible than black-and-white text. Our goal was to connect with people no matter what form of communication they needed and no matter what platform they preferred.

Extending our campaign's reach and impact, we also audited the FDA's existing communications on the topic to ensure clarity and conformity in the agency's approach.

Since the March 2015 approval of its first biosimilar, the FDA has now approved more than three-dozen biosimilar medications. Moreover, current estimates suggest one million Americans have turned to biosimilars. Thanks to Palladian's work for the FDA, patients and providers are better equipped to understand these treatment options and potentially find more affordable, but clinically similar, medicines. Simply put: more affordable treatments can help more patients.

Palladian's strategic communications expertise helped the FDA educate and empower providers and patients to make informed decisions about biosimilars.

Addressing the Addiction Crisis Through Peer Recovery Support Services

Drug overdose deaths in the United States accelerated during the COVID-19 pandemic, rising nearly 30 percent in 2020 to a record 93,000 — the largest single-year increase ever recorded. Mirroring the pandemic's disproportionate impact on communities of color, overdose deaths among Black and Hispanic populations increased at a more rapid pace than in White communities. Substance use disorders (SUD) and overdose risk are also strongly correlated with a history of involvement in the justice system. Studies show the risk of death from opioid overdose is particularly high in the period following an individual's release from prison. To confront the overdose crisis, it is crucial to address the disparities in addiction treatment to reach as many individuals as possible with these critical services.

It's been proven that social support from peers who have personally experienced addiction and gone through the recovery process can improve outcomes for those struggling with SUD. These survivors have a role to play in increasing the engagement of difficult-to-reach individuals, particularly within criminal justice and child welfare systems. Considered a best practice by the Substance Abuse and Mental Health Services Administration (SAMHSA), peer recovery support services (PRSS) help mitigate nationwide shortages in mental health and SUD treatment providers. Keeping up with the latest innovations and developing implementation strategies for emerging best practices can be challenging for the diverse, and often busy, organizations capable of providing PRSS. With training and technical assistance (TTA), however, they can increase their capacity and expand their PRSS offerings.

In 2017, Altarum was selected by the Bureau of Justice Assistance (BJA) to launch a national TTA center to support organizations seeking to implement or expand peer recovery programs to address opioid and other SUD for justice-involved populations. Drawing on individual subject matter expertise and decades of experience in developing PRSS programming, we have built and maintained strong relationships with over 200 grantees and partnering organizations as part of this continued work.

Using evidence-backed approaches, Altarum teaches best practices via online webinars, publications, podcasts, virtual communities of practice and consultation, and in-person training that promote peer-to-peer learning. With a focus on diversity, equity, and inclusion (DEI), we are increasing outreach to racially minoritized individuals who, research shows, have historically been stigmatized or overlooked by addiction treatment providers. We're also active in child welfare settings, providing peer support for families with children who are struggling with addiction or are involved in the justice system. Our TTA offerings range from the dissemination of foundational practices for widespread adoption to highly individualized services based on grantee requests.

Here are a few of our accomplishments in 2022:

- Providing targeted TTA to 18 primary and over 100 secondary grantee sites by hosting quarterly grantee and advisory board calls
- Recruiting and vetting 10 new mentor sites — virtually and on-site — for the 2022-23 Peer Recovery Support Services Mentoring Initiative (PRSSMI) to match and coordinate with mentee sites across the country
- Conducting intensive on-site TTA in California to improve coordination between the Orange County Health Care Agency and law enforcement as well as increase participation in a program that connects individuals leaving the county jail with medication-assisted treatment (MAT)
- Continuing long-term TTA in Minnesota to implement PRSS through emergency departments statewide
- Developing nearly 20 universal TTA products to disseminate to the criminal justice field, including recovery community organizations, law enforcement organizations, treatment court and jail-based settings, and re-entry programs
- Developing five toolkits and corresponding Champions of Recovery videos for BJA's 2022 Recovery Month celebration
- Presenting at two national conferences: the National Association of Drug Court Professionals (NADCP) and the Cocaine, Meth & Stimulant Summit
- Exhibiting at two national conferences: NAADAC, the Association for Addiction Professionals and the National Association of Peer Supporters (NAPS)
- Exhibiting at two national conferences: NAADAC, the Association for Addiction Professionals and the National Association of Peer Supporters (NAPS)

As a result of these efforts, the program's grantee sites experienced measurable outcomes, with PRSS contributing to a more than 65 percent decrease in fatal overdoses in a six-month period at one site and leading to a fivefold increase in the number of treatment referrals between 2020 and 2022 at another. Grantees also see significant cost savings associated with improved participant outcomes due to reductions in emergency department visits and inpatient admissions.

By sharing best practices, strengthening organizational capabilities, and increasing coordination between law enforcement and community-based organizations through our technical assistance work with BJA, Altarum is helping confront the opioid, addiction, and behavioral health workforce crises by ensuring comprehensive peer recovery supports are available in more communities nationwide.

ADVANCING PUBLIC HEALTH

Addressing Systemic Inequities in Support of a 21st Century Maternal and Child Health Workforce



Despite advances in medical care, stark racial disparities persist in maternal and child health (MCH). Compared to White women, Black women face risk factors in childbirth that increase the likelihood of infant mortality as well as rates of pregnancy-related death that are two to three times higher. To better serve America's increasingly diverse population and ensure equitable outcomes, it is imperative that we accelerate improvements in MCH health and well-being. Building a more inclusive next-generation MCH workforce is one way we do this.

For more than 20 years, Altarum has provided broad research, planning, and evaluative support for Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) programs through a contract; these efforts have included convening expert advisory panels and working groups to facilitate information-sharing and virtual collaboration. More recently, we began a five-year project to support the bureau's research and workforce training programs, which comprise grantees from universities and affiliated MCH research, service, and other learning institutions. Critical to this effort is the inclusion of voices that historically faced limits to accessing, enrolling, and participating in MCHB programs, services, and committees and to engaging with MCHB staff in decision-making — historically black colleges and universities (HBCUs).

Since June 2021, Altarum has led a strategic workgroup made up of MCHB staff and staff from 10 HBCUs, otherwise known as the HBCU Alliance Team (HAT), to advance discussions and expand knowledge around MCH health. The HAT is a subgroup of the [Consortium of African American Public Health Programs](#), whose mission is to advocate for equity and social justice through research and service.

While our work is just beginning, we're currently facilitating bimonthly meetings to promote bidirectional knowledge transfer on topics of interest. Past meetings have included presentations on the Healthy Start program from the Division of Healthy Start and Perinatal Services, the National Survey of Children's Health from the Office of Epidemiology and Research, and mentorship resources available through Association of Teachers of Maternal and Child Health.

Additional accomplishments include:

- Hosting the inaugural Targeting Healthy Results for Infants from Vulnerable Environments (THRIVE) Summit in April as part of National Public Health Week. With more than 225 attendees, the four-hour virtual event provided a forum for sharing approaches to addressing maternal and infant health disparities and workforce development opportunities. It also encouraged interdisciplinary partnership and collaboration across the private and public sectors.
- Supporting the development of a recommendations report for the federal government. To further advance access and equity in MCH health, MCHB asked HAT to share how the federal government could address barriers to HBCU participation in MCHB decision making and to accessing funding. Altarum led discussions with HAT members to capture their recommendations and draft a report, which was delivered to MCHB.

Based on the success of the first THRIVE Summit, Altarum is already leading the planning of the second annual event, which will be expanded to two days to allow for even greater opportunities for networking and knowledge transfer. We look forward to continued collaboration with the HAT and MCHB to improve the health of MCH populations and communities experiencing inequities.

Data Sharing for Newborn Screening Interoperability

Millions of infants are born in the United States each year, and early detection of genetic, endocrine, metabolic, hearing, and critical congenital heart conditions ensures that they can receive timely treatment for these critical conditions. Newborn screening programs provide this vital public health function, yet, in many jurisdictions across the country, newborn screening data can be fragmented and siloed. Barriers such as gaps in technical expertise and workforce capacity can also prevent newborn screening results from being exchanged in a manner that supports timely and high-quality data moving between providers, state programs, and labs, which, in turn, impacts the timeline for treatment and assistance provided to infants and families.

Altarum and its partners are helping states address these issues, through creation of the [Innovations in Newborn Screening Interoperability \(INBSI\)](#) project. As part of this project, Altarum created and maintains an online [Resource Center](#) for state newborn screening programs that includes monthly live webinars, on-demand training resources, and Project ECHO, a virtual learning collaborative that connects participants to subject matter experts and peers. Through INBSI, Altarum also provides technical assistance to states to advance their newborn screening interoperability, from assessing state readiness to providing direct technical assistance and creating customized roadmaps for enhancing interoperability. Altarum is also active in national policy and standards discussions, working to ensure that high quality standards are available to newborn screening programs and that policies and regulations reflect the important role these programs play in public health.

Since its launch in 2020, the INBSI program has impacted state newborn screening programs in the following ways:

- To date, 48 states have benefited from training and education made available through Altarum's INBSI project
- 13 states have enrolled in the INBSI technical assistance program, with seven completing Readiness Assessments and five completing their individual state Interoperability Roadmaps
- Seven states participated in the first cohort of the ECHO educational offering and 18 states are currently participating in the second cohort
- 47 trainings were developed and are available on the online Resource Center



Faculty, Advisory Board members, and staff for INBSI include some of the world's experts in HL7 messaging, Dried Blood Spot Screening, Early Hearing Detection and Intervention, Critical Congenital Heart Disease, metabolic conditions, hospital and health department leadership, and health information technology. Through the INBSI program, we have learned that newborn screening programs thrive when collaborating with other states and that interoperability helps identify gaps in follow up care for newborns and can be a tool for addressing health equity. By enhancing connectivity between state public health newborn screening programs and health care providers, Altarum's work on the INBSI project aims to reduce morbidity and mortality associated with heritable disorders in newborns and children.

States across the U.S. are benefiting from Altarum's technical assistance and educational offerings in support of their newborn screening programs.

Altarum Enhances Michigan Cancer Surveillance Efforts by Validating Cancer Data Quality

The ability to gather and track disease-related data is critical for improving public health. Specifically, disease surveillance databases are essential for identifying public health resource needs, tracking disease trends over time, determining the impact of programs and medications designed to prevent or treat disease, and informing research around the development of new treatments and interventions. For cancer—currently the [second leading cause of death](#) in the United States—these databases provide public health organizations a reliable way to track cancer incidence, prevalence, and mortality across communities, states, and the nation, contributing to collective knowledge of the disease. Playing a key role in the aggregation and surveillance of these data at the national level, the Centers for Disease Control and Prevention (CDC) works with states to oversee the National Program of Cancer Registries and provide funding for this work.

In Michigan, the Michigan Department of Health and Human Services (MDHHS) Division for Vital Records and Health Statistics is responsible for serving in this critical function, maintaining the [Michigan Cancer Surveillance Program](#) (MCSP), with funding from the CDC. With limited additional resources, MDHHS faced a significant challenge: ensuring the quality and standardization of data collection throughout the state as well as data from the Detroit Cancer Surveillance program, which operates in the tri-county Detroit area and is separate from other state surveillance efforts.

To streamline the flow of these data, MDHHS turned to Altarum. Since 2013, we have provided the technical support to help the department take on this endeavor. With the right processes and applications in place, we have improved MDHHS's ability to successfully collect, validate, prepare, and consolidate cancer surveillance data collected throughout the state. But, we didn't stop there.

Our approach is all-encompassing, including a heavy focus on quality assurance. Through a partnership with Certified Tumor Registrars (CTRs) across Michigan and at the Detroit Cancer Surveillance program, we lead regular data submission cycles to confirm the quality of cancer surveillance data.

Because cancer data are complex—containing genetic information, stage information, and tumor sizing, in addition to disease type, comorbidities, and demographics—we put them through rigorous evaluation to ensure they are accurate and complete. This step helps verify whether or not data can be useful in surveillance and research efforts. Altarum examines the data and develops database scripts to, first, detect errors before submission and, second, programmatically fix those errors to ensure the data are sound.

By improving the speed and accuracy of data submission, we made it easier for scientists and public health officials to efficiently and promptly access high-quality cancer data to better treat this complex disease.

For the quality, completeness, and timeliness of 2019 cancer data, the MCSP received [Gold Certification](#) from the North American Association of Central Cancer Registries and continues year after year to be named a Registry of Distinction by the CDC National Program of Cancer Registries.



ABOUT OUR CULTURE

Committed to Our Team Members and Our Communities

Our Values

FOR A GREATER GOOD

OWNING OUR FUTURE

SUCCESS THROUGH SERVICE

EXCELLENCE TOGETHER

INFORMED AND INCLUSIVE

INTEGRITY FIRST



Affinity Board



Our Affinity Board works alongside our leadership to bolster communication and collaboration; champion diversity, equity, and inclusion; and drive cultural initiatives.



Join our team! VISIT altarum.org TO EXPLORE OPPORTUNITIES.

*“Dedication.
Direction. Delivery.”*



altarum.org | info@altarum.org

Follow Us: [linkedin.com/company/altarum](https://www.linkedin.com/company/altarum) | [@altarum](https://twitter.com/altarum)



READ MORE
OF OUR
2022 IMPACT
STORIES

OUR OFFICES

Ann Arbor, Michigan
3520 Green Court
Suite 300
Ann Arbor, MI 48105
734.302.4600

Arlington, Virginia
2500 Wilson Boulevard
Suite 400
Arlington, VA 22201
202.828.5100

Portland, Maine
4 Milk Street
Third Floor
Portland, ME 04101-4164
207.772.1410

Silver Spring, Maryland
One Inventa Place
West Tower, Suite 800
Silver Spring, MD 20910
301.650.8660