Equity and Practice Transformation (EPT) Payment Program
Enhanced Outreach & Engagement

**Instructions**

Using the [EPT deliverable portal](EPT deliverable portal), please complete the prompts for all questions in this template.

This EPT milestone is: Develop and implement outreach strategy for population of focus to ensure access to evidence-based care using clinical guidelines and to address disparities. This should include review of reports of patients assigned but not seen and patients with care gaps, development of workflows, and identification and training of care team members to do the work.

**IDENTIFYING & OUTREACHING TO THE ASSIGNED BUT UNSEEN POPULATION**

**Question 1: Population of Focus**

Automatically displayed

| Response Criteria: |
|---|
| N/A - Question not scored |

**Question 2:** Outreach strategy: Describe how your practice conducts outreach and engagement for your selected PoF. Use the table below to detail your current outreach approach, including how patients are identified, who conducts outreach, and how you track and tailor your efforts to support equity and access. (You may reference plans described in your EPT data implementation plan.)

| Response Criteria: |
|---|
| • **How do you identify patients who need outreach?**<br>  ○ The response should describe a process that includes (a) at least 2 steps/activities to identify patients who need outreach and (b) at least one data source (e.g., panel reports, care gap reports, MCP lists). For example, a practice might say that they review MCP lists for assigned but unseen patients and run a monthly care gap report.<br>• **What is your outreach target?**<br>  ○ The response should include (a) number or percentage target, (b) a timeframe and (c) a specific population. A range is also acceptable. For example, a |

practice could respond that they aim to outreach to 20% of the assigned and unseen population each month.

- **How often is outreach conducted?**
  - The response should provide a specific timeframe for outreach (e.g., weekly, biweekly, monthly, once per quarter, twice yearly, etc.)
- **How do you protect staff time for outreach activities?**
  - The response should include at least one specific method to protect staff time for outreach. This could include dedicated staff, blocked scheduling time, shared roles, or another method that demonstrates that outreach is work that is considered part of someone's workload, not something done when someone has extra time.
- **Who is responsible for conducting outreach?**
  - The response should include a role (e.g., care coordinator) or team (e.g., our designated outreach team of 3 care navigators).
- **What outreach methods are used?**
  - Responses must provide at least 1 method of communication directly to a patient, such as phone calls, emails, texts, letters or portal messaging, etc.
- **What is being offered or communicated during outreach?**
  - Responses should list a minimum of one service or activity that is included in outreach messaging (e.g., PCP visit, screening appointment, lab work, support with barriers to care, immunizations, etc.).
- **How is outreach documented and tracked?**
  - Responses should list a minimum of one method of documentation/tracking, such as EHR encounter note, outreach log, care management platform, etc.
- **How many outreach attempts are made? What happens if the patient is not reached?**
  - Responses should include a specific number of attempts and may also include triggers for follow-up outreach (e.g., 3 attempts before mailing a letter).
- **How is outreach tailored to address equity and access challenges?**
  - Responses must offer a minimum of one specific example of tailoring to equity and access challenges, such as assistance with transportation, providing culturally and linguistically appropriate communication, flexible appointment hours, etc. Responses that are more general (e.g., we support all patients in accessing our services) do not meet the requirements of this question.

**Pass:**
The response passes if it adequately addresses 8 of 10 prompts, meeting criteria described within each prompt.

**Fail:**
The submission fails if 7 or fewer prompts are not adequately described, meeting criteria within each prompt.

**Question 3:** Care Team Roles and Training: Please describe which care team members are responsible for outreach, what activities they perform, and any training, scripts, or tools provided to support them.

**Response Criteria:**

- Care Team Roles
    - List at least  one care team role responsible for outreach activities, including preparing for outreach (e.g., development of materials, identifying outreach targets, etc.), conducting outreach, and reviewing the effectiveness of outreach
- Outreach Responsibilities:
    - For each role listed, the specific outreach responsibilities should be described.
- Describe any applicable trainings/scripts/tools provided (e.g., call scripts, training on cultural humility, EHR documentation training)
    - For each outreach role, the specific tools that the staff person uses should listed here. There should be a minimum of one tool per outreach role and if not, describe why this is not applicable (e.g., our CMO did not need a specific tool or training to review and finalize outreach scripts)

**Pass:**
The submission lists at least one care team role responsible for outreach, the specific outreach activities that role is responsible for, and the tools or training provided to that professional or the reason why tools and training were not applicable.

**Fail:**
If the response does not provide at least one care team role and the associated outreach responsibilities, it fails.

**Question 4:** Evidence of Implementation: List at least two actions your practice has implemented to strengthen outreach and engagement for your selected PoF. For each, include the date the action was first implemented (i.e., when it launched or began being used with patients), how many patients were impacted, how success was measured, and any observed outcomes. Small-scale pilots and PDSA cycles are acceptable. To meet this milestone requirement, practices must implement at least two NEW actions (since the start of EPT) by November 2025.

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**Response Criteria:**

- **Implemented Action**
  - A minimum of two actions are listed and each action is clearly described (e.g., our practice updated all of our scripts for our outreach calls to improve messaging to patients).
- **Date of Implementation Start**
  - A specific date is provided for at least two actions. This date should not be before January 2024 which is the start of EPT.
- **# of Patients Impacted**
  - The *number* of patients impacted for at least two actions is provided. A percentage should not be used here. Practices that would like to use a percentage should also translate that percentage to a number (e.g., 20% of our assigned and unseen patients, which is 125 patients).
- **Metrics Used to Evaluate if Action was Successful**
  - At least one metric for each action is provided. The metric must be clearly described (e.g., % of patients reached by phone, % of patients who were on outreach lists who came in for a visit, % reduction in care gap, etc.)
- **Results Observed**
  - Each action must have at least one observed result. The observed result could be about the relative success of various types of outreach, whether any variable (e.g., time of day that outreach was conducted) impacted success, or another observation that results in determining whether that outreach effort was successful.

**Pass:**
At least two actions are clearly described and each action also has the date of implementation, number of patients impacted, a metric to evaluation if the action was successful, and an observation of the result.

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**Fail:**
If fewer than two actions are listed the submission fails. If incomplete information is provided for at least two actions (e.g., date of implementation start, number of patients impacted, metrics to evaluate success, and results observed), the submission fails.