



DRAFT FOR FEEDBACK: AMC APM Demonstration Core Measures

For each of the measures below track by these elements (e.g., race/ethnicity, age [including transition-age youth vs. ≥21]), gender, primary language, rurality, disability/intellectual and developmental disabilities, housing status, payer type, diagnosis) and look for disparities among these demographics.

Please provide feedback on all draft quality measures. Providers should focus their feedback on yellow items.

Measure	Description
Geographic Coverage	Service Availability <ul style="list-style-type: none"> • Geographic coverage across counties or service areas.
Response Timeliness (Urban/Rural)	Response Timeliness <ul style="list-style-type: none"> • % of immediate responses arriving ≤60 minutes (urban/suburban). • % of immediate responses arriving ≤120 minutes (rural).
Community Stabilization (On-Scene Resolution)	Community Stabilization (Diversion) <ul style="list-style-type: none"> • % of encounters resolved on scene without transfer to ED, inpatient, or other facility.
Law Enforcement Involvement	Law Enforcement Involvement <ul style="list-style-type: none"> • % of AMC encounters with law enforcement present.
Safety Plan Completion	Safety Plan Completion <ul style="list-style-type: none"> • % of encounters where a safety plan is developed.
Follow-Up Within 72 Hours	Follow-Up Within 72 Hours <ul style="list-style-type: none"> • % of encounters receiving post-crisis follow-up contact within 72 hours.
Warm Hand-Offs (≤7 Days)	Warm Hand-off Completion <ul style="list-style-type: none"> • % of encounters with warm hand-off to outpatient or community services within 7 days.
Repeat Crisis Episodes (30/180 Days)	Repeat Crisis Episodes <ul style="list-style-type: none"> • % of individuals with another crisis episode within 30 days and 180 days.

Provider Organizational Data

Manually Collected, Provider Electronic Health Record, Clinical Management

Claims/Encounter Data

Provider Consumer Satisfaction Data

Emergency Department/ Inpatient Use After AMC	Emergency Department and Inpatient Use <ul style="list-style-type: none"> • Rates of behavioral health-related emergency department visits within 30/90/180 days of AMC encounter. • Rates of psychiatric inpatient admissions within 30/90/180 days.
Outpatient Follow-Up (7/30 Days)	Outpatient Engagement (7/30 Day Follow-Up) <ul style="list-style-type: none"> • % of individuals with BH outpatient follow-up within 7 days or 30 days after an ED or inpatient event.
Cost and Payer Mix Sustainability	Cost of AMC Services <ul style="list-style-type: none"> • Cost per encounter and per individual served. Payer Mix & Revenue Coverage <ul style="list-style-type: none"> • % of AMC program costs covered by APM revenue. • % of cost paid by Medicaid/commercial insurance. (60% target mentioned for statewide behavioral health organizations). Estimated Cost Avoidance <ul style="list-style-type: none"> • Modeled savings related to decreased emergency department, inpatient, or justice involvement.
Consumer/Family Experience	Satisfaction & Experience <ul style="list-style-type: none"> • % of individuals/families reporting positive experience with crisis response. • Measures of feeling safe, respected, culturally understood, and clear about next steps.





Provider Organizational Data

Manually Collected, Provider Electronic Health Record, Clinical Management

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