



# Altarum

## 2023 IMPACT REPORT

[impact.altarum.org/2023](https://impact.altarum.org/2023)  
[info@altarum.org](mailto:info@altarum.org)  
800.879.6505

# 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, state, and local government entities in planning and implementing vital public health and health care service delivery programs. Rooted in public-sector innovation since 1946, we combine our expertise in public health and health care delivery with technical assistance, practice transformation, training, quality improvement, applied research and analytics, health and science communications, data modernization and interoperability, and technology development and implementation. Altarum's innovative solutions and proven processes lead to better health for all.

[LEARN MORE AT ALTARUM.ORG](https://www.altarum.org)

## SENIOR MANAGEMENT GROUP

### MICHAEL MONSON

President and Chief Executive Officer, Altarum

### SARAH BARTH

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

### JOSH DELUNG

Executive Vice President, Integrated and Digital Innovation, Palladian Partners

### TARA FOWLER

Vice President, Population Health, Altarum

### SUSAN HAYASHI

Vice President, Health Innovation, Altarum

### LESA LITTERAL

Executive Vice President and Chief Administrative Officer, Altarum

### LAURA SANKEY

Executive Vice President and Chief Program and Strategy Officer, Altarum

### DENISE STURM

Executive Vice President and Chief Financial Officer, Altarum

### ERIN TURNER

Executive Vice President, Strategy and Delivery Solutions, Palladian Partners

### JASON YOUNG

President, Palladian Partners

## BOARD OF TRUSTEES

### JOSEPH FIFER

Chair  
Former President and CEO, Healthcare Financial Management Association

### LINDA ELAM

Vice Chair  
Managing Director, Manatt Health

### MELANIE BELLA

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

### ROSEMARY GIBSON

Senior Advisor, The Hastings Center

### JENNIE CHIN HANSEN

Former CEO, American Geriatrics Society

### MICHAEL MONSON

President and Chief Executive Officer, Altarum

### LAQUANDRA S. NESBITT, MD, MPH

Senior Associate Dean for Population Health Sciences and Health Equity, The George Washington University School of Medicine and Health Sciences

### THOMAS RANESE

Global Chief Marketing Officer and Advisor

### BRUCE C. VLADDECK

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

### KELVIN WOMACK

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

## A MESSAGE FROM OUR CEO

# *Experience Ignites Innovation*

## SHAPING TOMORROW'S HEALTH TODAY

Altarum has a deep-seated commitment to improving the health of individuals with fewer financial resources and populations disenfranchised by the system. As dedicated stewards, we bring our long-standing expertise to assist federal, state, and local government agencies in planning and implementing vital public health and health care service delivery programs. We extend their teams, working towards the shared mission of improving health for all.

The Altarum Enterprise is comprised of four operating divisions—Population Health, Public Health Systems, Palladian Partners, and Altarum Medicare Medicaid Services for States (AMMS). We are deeply immersed in the most critical and pressing public health and health care issues of our times, of which there are many. We stay at the forefront of innovation, working with our clients to lead the way in finding creative and enduring solutions to improve health.

This year's 2023 impact report highlights only a fraction of our meaningful work. Throughout these stories, you will find examples of how we have effectively partnered with our clients to tackle some of the most challenging problems facing the public health and health care delivery systems, including innovative work for:

- 🔗 The states of Tennessee, Maine, Michigan, and Texas to develop and administer strategies and programs to advance health, health equity, wellness, and independent living for individuals eligible for both Medicare and Medicaid. [Read more about this on page 5.](#)
- 🔗 The Substance Abuse and Mental Health Services Administration (SAMHSA) to launch the 988 National Crisis Systems Response Training and Technical Assistance Center (CSR-TTAC) in support of a crisis care system that is integrated, sustainable, equitable, and aligned with evidence-based practices. [Read more about this on page 9.](#)
- 🔗 The Centers for Disease Control and Prevention (CDC) to help reduce the burden of mpox on disproportionately affected communities through research on effective messages and tools for providers via the National Coalition for Sexual Health (NCSH). [Read more about this on page 12.](#)
- 🔗 The National Council on Aging (NCOA) to develop and execute a national communication and marketing campaign to safeguard lives through greater Covid-19 and flu vaccination rates among older adults. [Read more about this on page 13.](#)
- 🔗 The Orange County Health Care Agency's Public Health Services to develop and manage a Multi-Drug Resistant Organism (MDRO) data exchange. [Read more about this on page 17.](#)

On behalf of the Altarum Enterprise and our dedicated employees, we are grateful to have the opportunity to work so closely with our many clients to make an impact on the lives of those they serve.

A future of better health for all is within reach and we invite you to join Altarum on this journey. We are confident in our collective ability to work with our trusted partners to make a real difference in the lives of the people, communities, and populations they serve.



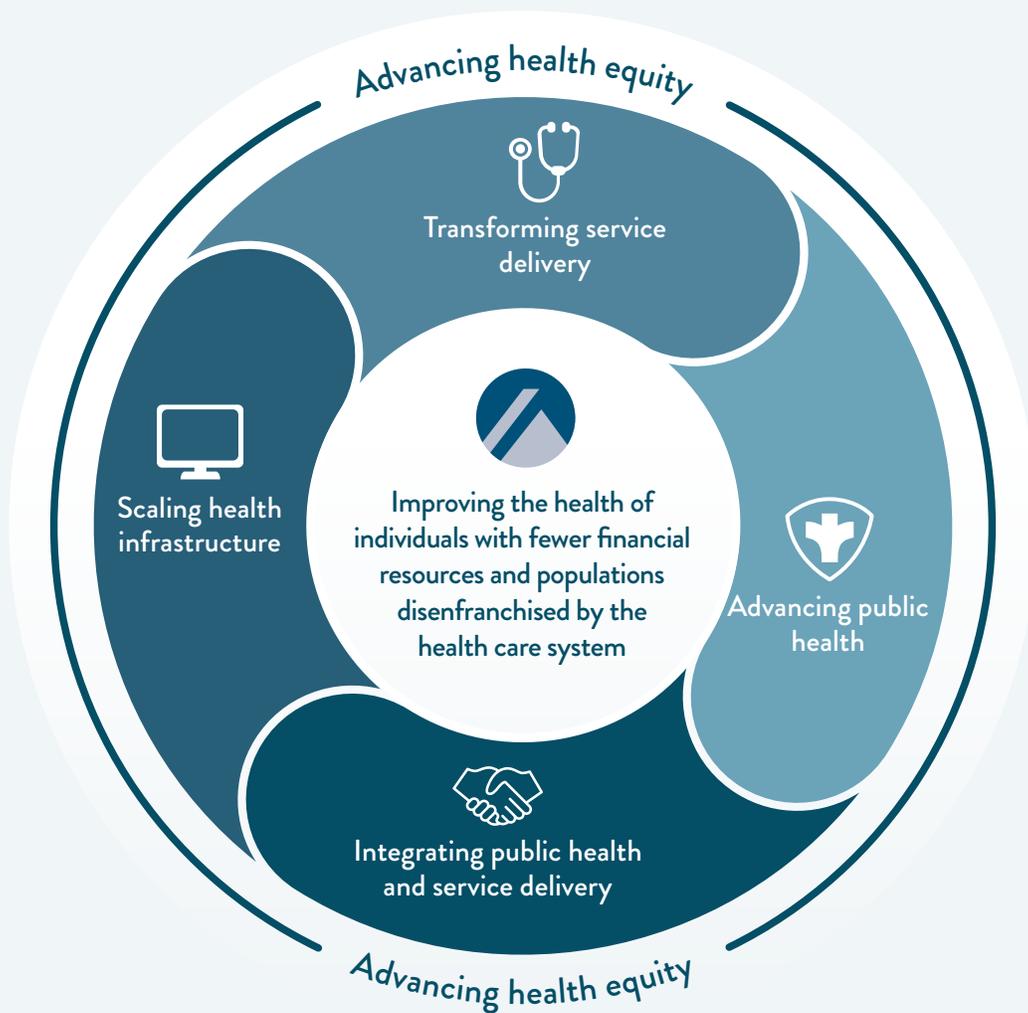
**Michael Monson**

PRESIDENT AND CHIEF EXECUTIVE OFFICER

## 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.



[LEARN MORE ABOUT ALTARUM'S IMPACT AT IMPACT.ALTARUM.ORG/2023](https://impact.altarum.org/2023)

## TRANSFORMING SERVICE DELIVERY

# Partnering with States to Advance Better Programs for Individuals Eligible for Both Medicare and Medicaid



For the [12.5 million](#) individuals who are eligible for both Medicare and Medicaid or “dually eligible,” access to integrated and coordinated care and services can be challenging. To qualify, these individuals must meet national requirements for Medicare (either 65 or older, and/or younger with a qualifying disability) and Medicaid requirements which include state-specific requirements. These populations are low income and very diverse in race, ethnicity, age, gender, disability, cognitive ability, physical and behavioral health status, and social circumstances which may require varied program approaches. The individuals must navigate multiple and often complicated eligibility determination, enrollment, and program structures for Medicare and Medicaid.

States are often challenged in administering programs for dually-eligible individuals because Medicaid and Medicare were not created to work together. State officials have many competing priorities. They often do not have staff with deep Medicare subject matter expertise to navigate the complexities of the Medicare and Medicaid programs’ requirements and advance how they may work together better to provide holistic and person-centered care, as well as more efficient program administration and oversight.

Altarum Medicare-Medicaid Services for States (AMMS) was created in 2022 to meet an identified need to bolster state capacity to build better programs for dually eligible individuals. AMMS combines a data-driven analytic approach with extensive national and state expertise around the dually eligible population, and the programs that serve them. It has extensive experience in Medicare-Medicaid integration and Medicaid long-term services and supports program policy and administration. Its experts meet states where they are on their journey to sustainable solutions that advance health, health equity, wellness, and independent living for dually eligible individuals. AMMS offers state-tailored services in strategy and program design, as well as administrative and operational support, data analytics and communications, to build and enhance state capacity. We take a holistic, partnership approach to our work with states and dually eligible individuals and their families and caregivers, their providers, and often their health plans.

We are currently working with states, including Tennessee, Maine, and Michigan, to enhance the quality, experience of care and services, efficacy, and cost efficiency of programs that serve dually eligible individuals.

### Partnering to build a stronger program in Tennessee

AMMS is partnering with Tennessee to build upon its current dual integration program to enroll more people in this program that was specifically designed to meet their needs and preferences and advance health equity and cost efficiencies of the program. This includes:

- Program strategy and design
- Program implementation, administration, and oversight
- Quality measurement
- Medicare Advantage Special Needs Plans consultation
- State Medicaid agency contract support
- Cost efficiency and savings efforts
- Staff extension services

STORY CONTINUES ON NEXT PAGE ►

## Partnering with States to Advance Better Programs for Individuals Eligible for Both Medicare and Medicaid (continued)

### Charting a program path for Maine

AMMS is providing population and program expertise to Maine to help chart a path to strengthen state capacity to develop, oversee and implement approaches to better integrate Medicare and Medicaid for individuals served and advance a more efficient, coordinated program structure. Our work includes producing a dual eligible population landscape analysis, a systems and oversight analysis, and roadmap for moving forward.

### Helping Michigan transform a demonstration program into a permanent program

AMMS is helping the state transition a dual eligible demonstration program to continue to provide the most integrated and tailored program option possible for dually eligible individuals in Michigan. We are providing hands-on project management and program expertise supporting

on-the-ground program staff and serving as advisors to Michigan Medicaid leadership. Our work includes supporting the development and release of a request for proposal for its new integrated program.

Sarah Barth, Executive Director, AMMS, says, “States value working with AMMS not only because we have on-the-ground implementation and policy expertise, but also because we sit down with the states and their teams and really listen to what they are wrestling with. We help them identify solutions and then bolster and grow internal capacity to grow and support these programs.”

She further explains, “*States also benefit from the experience of knowledge sharing; they hear what is and is not working in other states, not just about policy, but about states’ ‘on the ground experiences’ working with a population which is dually eligible.*”

## TRANSFORMING SERVICE DELIVERY

# Enabling States to Support the Direct Care Workforce and Those Who Need Their Services

Over four million people use Medicaid home and community-based services (HBCS) to maintain their dignity, lifestyles, and health. However, acute labor shortages, rising demand from an aging population, and tight state budgets make it difficult for recipients or agencies to locate the right care provider. Most states struggle with the sizable difference between the numbers of individuals who qualify for Medicaid-financed long-term services and supports (LTSS) and the direct service care workers available to perform it. Worse, the pandemic exacerbated direct care workforce staffing shortages. To help provide relevant solutions to our state partners, Altarum partnered with [ADvancing States](#) to provide a flexible online “one stop shop” platform to meet the specific needs of LTSS stakeholders—states, care providers, and care recipients.

STORY CONTINUES ON NEXT PAGE ►

## Enabling States to Support the Direct Care Workforce and Those Who Need Their Services (continued)

The platform, [DirectCareCareers.com](https://DirectCareCareers.com), serves as a broader direct care career workforce management tool. We work with states to configure the platform to meet their specific needs.

Depending on the preferences of the state, the platform:

- Provides a centralized location for individuals receiving services (consumers) and agencies providing services to post open job positions
- Delivers automated, real-time, job candidate to job description matching for employers and candidates
- Allows candidates to create a profile highlighting their skills, experience, job preferences, certifications, and credentials
- Acts as a credentialing system of record as well as a tracking database for the workforce
- Serves as an HCBS workforce knowledge center for states to post policies, initiatives, trainings, and other relevant information
- Enables direct communications to the workforce and workforce employers
- Supplies a centralized learning management system to add, manage, mandate, or recommend workforce trainings
- Furnishes registry insights about the demand for direct care providers and the people who are filling that need across the state
- Offers bi-directional communication between candidates and potential employers to streamline the recruitment and employment process

In the past year, Altarum has launched configured platforms for Texas and Colorado, and is on target to go live with North Dakota. The platform allows organizations with state contracts to view a registry of all approved LTSS providers, including their location, services, rates, and availability.

“The DCC was specifically designed to address the needs of the LTSS industry by the experts at Altarum and ADVancing States who know the ins and outs of the home and community-based services industry and its current needs,” Krissy Azeem, Senior Director, Delivery System Transformation at Altarum. “Our platform was developed to be flexible for both our state partners and managed care organizations who want to better engage their provider partners and streamline supports for their self-directing beneficiaries.”

The platform is a collaborative site where employees can connect and access job postings without having to apply for positions in multiple different places—a central hub for provider agencies and employers who can compare apples to apples. The standardized data entry form for applicants allows states and hiring agencies to study the workforce and identify caregivers with specific skills, job specifications, and credentials.

“Our goal is to have direct care workers and employers say, ‘This is where I want my information because it’s going to give me the best opportunity to connect and either hire or be hired in this industry,’” Katie Schmit, Project Manager, Delivery System Transformation at Altarum, explained.



# Achieving the Quadruple Aim for Defense Health Agency Beneficiaries

The United States Department of Defense's (DoD) Defense Health Agency (DHA) provides TRICARE health insurance coverage for over [9.5 million](#) beneficiaries worldwide. These beneficiaries include active-duty service members, retired personnel, and their families. Altarum has the honor of helping the DHA achieve the Quadruple Aim—enhancing patient experience, improving population health, reducing costs, and improving the work life of health care providers—via the knowledge gained through administering three health care surveys to beneficiaries.

These three surveys—the Health Care Survey of Department of Defense Beneficiaries (HCSDB), the TRICARE Select Survey of Beneficiaries (TSS-B), and the TRICARE Select Survey of Civilian Providers (TSS-P)—are unique in that they provide DHA with important data not obtainable through other means, such as self-reports of the quality of their health care, details of patient-provider interaction, and information on delayed or missed care. The HCSDB, a Consumer Assessment of Healthcare Providers and Systems (CAHPS(R)) survey, provides insights beyond what is collected at or about health care encounters. Conducted since 1995, this survey invites 300,000 DoD beneficiaries annually to share their health experiences. The survey captures from the experiences and opinions all types of beneficiaries: those who actively use clinical services, those who don't, and those, such as spouses, who may be using other primary health care insurance providers.

Altarum has partnered with DHA on these surveys for almost two decades, using rigorous survey design science and methodologies, a deep understanding of Military Health System operations and data security, and system architecture implementation. We've created a system to field survey invitations from within DoD firewalls to ensure that we can reach Active Duty service members via email. Survey data are collected quarterly, with a rotating question set each quarter to gather timely information on topics of interest to senior health leaders, such as responses to the Covid-19 pandemic, adoption of telehealth, and drivers of mental health outcomes.

We, along with our partner Westat, apply our unique DoD experience and analytic skills to understanding survey results to provide the DHA with a comprehensive view of beneficiary population health, wellness, and costs. Each year, we help the DHA consolidate these findings into a 100+ page document, the [Annual Evaluation of the TRICARE Program Section](#), on the activities and impact of the TRICARE system which is presented to Congress.

The Altarum team provides DHA with expert consulting when it comes to developing survey questions on topics of interest to senior leaders. We start by guiding the client through focused discussions of its enterprise goals, breaking the information down into distinct

research questions and eventually survey text developed through an evidence-based review of the literature and prior survey findings. Question sets developed by Altarum have generated critical pieces of information for DHA, such as questions related to Covid-19 vaccination and trust in the healthcare system, and food and financial security as DHA increases its focus on measuring social determinants of health (SDOH).

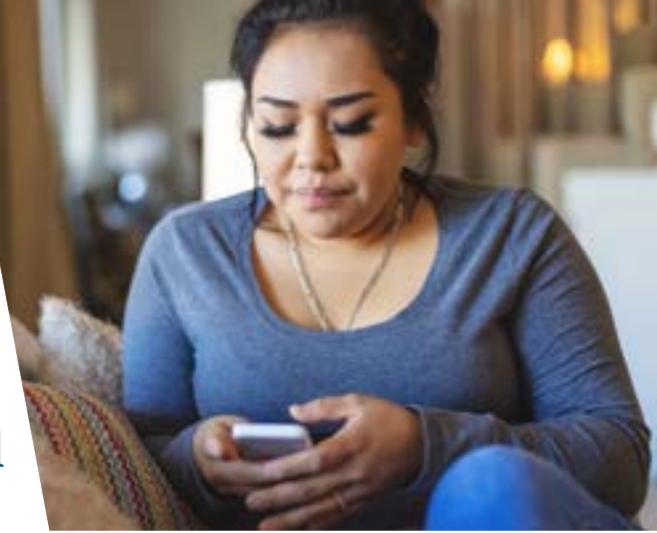
Chris Duke, Senior Researcher at Altarum, explains the nature of these surveys: “The surveys are special because they cover all TRICARE beneficiaries, and not just those who have had a recent health care encounter. We have the flexibility to quickly study areas of interest. When Covid-19 started spreading, we were able to ask Covid-19—related questions in the very next survey, allowing us to study rates of vaccination and trends over time and learn how preventive care changed during Covid-19.”

Timely survey questions developed by the Altarum team have quickly become a necessary asset to DHA leadership in understanding the needs of their healthcare beneficiaries. For example, survey questions addressing SDOH developed in 2023 may become permanent fixtures of the survey as improving equity in health care becomes the fifth aim of DHA in what some are now calling the Quintuple Aim. Going into 2024, the Altarum survey team will remain alert and agile to respond to the needs of senior health leaders.



## TRANSFORMING SERVICE DELIVERY

# Supporting an Integrated, Sustainable, and Equitable Crisis Care System for Substance Abuse and Mental Health Services Administration's 988 and Behavioral Health Crisis Coordinating Office



In 2023, the Substance Abuse and Mental Health Services Administration (SAMHSA) selected Altarum to provide training and technical assistance (TTA) support to States, Tribes, and Territories across the 988 Suicide and Crisis Lifeline. Altarum's national Crisis Systems Response Training and Technical Assistance Center (CSR-TTAC) supports a crisis care system that is integrated, sustainable, equitable, and aligned with evidence-based practices.

In 2019–2020, over 50 million American adults were experiencing a mental illness, though over half of them did not receive treatment.\* The Covid-19 pandemic exacerbated rising rates of suicide and substance use disorder, making the need for robust crisis services greater than ever.

In 2020, Congress designated 988 as the three-digit “[universal number](#)” for a national suicide prevention and mental health crisis hotline.” In 2021, state leaders cited multiple barriers to effective 988 and crisis system implementation, including workforce shortages, lack of infrastructure, challenges in meeting the needs of diverse populations, and limited collaboration across law enforcement and emergency medical and mental health services.

Health disparities and lack of resources lead many individuals in mental health crisis to interact with law enforcement instead of with mental health providers.

“I worked in the field for 12 years, and police officers see more mental health crises than any therapist I’ve met,” says Adalicia Carrillo, Altarum’s Co-Director of the CSR-TTAC. “One of the first things that we are doing is supporting work to help States, Territories, and Tribal organizations create a foundation of collaboration between 988 and 911,” says Carrillo.

Central to our work, Altarum’s team of experts from multiple sectors evaluates the TTA needs of SAMHSA’s grant recipients and the broader behavioral health crisis field and helps States address barriers to implementing an effective “no-wrong-door” integrated crisis system.

Altarum is collaborating with two woman- and minority-owned small business partners for the project: W2 Consulting Corporation and Change Matrix, LLC. Both have extensive experience with crisis services, technical assistance, and health equity.

To support the 988 Lifeline and build a more robust care system, Altarum’s TTAC will increase access to crisis services for those in need, convene experts to educate the field on best practices, and develop materials to help improve crisis services. Altarum will offer TTA through several formats to accommodate different types of learning styles, including collaborative webinars, office hours, learning communities, workshops, site visits, convenings, and specialized one-on-one TTA. Altarum and the CSR-TTAC will host a policy academy for States, Territories, and Tribal organizations to bring their leadership together to plan strategies for enhancing collaboration among partners in their behavioral health crisis system.

“We work on large system integration, but also factor in local and state integration,” says Carrillo. “As we work to standardize services, we also must focus on equity—for example, ensuring access to crisis care in Tribal or rural communities where an urban model of crisis care might not be appropriate.”

Altarum brings 25 years of behavioral health TTA experience to the CSR-TTAC, having led similar tasks for two national TTA centers, including SAMHSA’s Access to Recovery TTA Center.

“The backgrounds of the Altarum team members are really representative of the skills required to provide support throughout the crisis continuum of care,” Carrillo says.

The goal for the CSR-TTAC is to serve as a bridge between SAMHSA and the behavioral health crisis field, to learn what the field needs and provide that TTA to the field, and to identify and disseminate best and promising practices. The CSR-TTAC will help SAMHSA realize its vision of providing individuals in crisis someone to talk to, someone to respond, and a safe place to go for help.

\*Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (HHS Publication No. PEP20-07-01-001, NSDUH Series H-55). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.

# Strengthening Peer Recovery Support Services to Drive Success in Treating Substance Use Disorders

Since 2017, Altarum has effectively supported the Bureau of Justice Assistance’s (BJA) Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP) as the Training and Technical Assistance Center (TTAC) for peer recovery support services (PRSS). The BJA recognizes Altarum as a national PRSS expert. We have successfully partnered with more than 400 COSSUP grantees to deliver training and technical assistance (TTA) to tribal, state, and local justice, substance use treatment, and public health agencies. In October 2023, the BJA awarded Altarum a new contract, expanding the scope and focus of the TTAC to include additional recovery support services.

Substance use disorder has persisted as an increasingly devastating public health concern over the past three decades. Recently, the Covid-19 pandemic and the increase in synthetic opioids has exacerbated this crisis, particularly in Black, American Indian, and Alaska Native populations. PRSS play a significant role in addressing the addiction crisis and fill critical gaps in the behavioral health workforce.

Altarum’s approach to developing PRSS blends a diversity of learning methods and domains to tailor training to the needs of each organization we work with. We provide both one-on-one and group TTA, develop and communicate the role of peers, ensure peer success and wellness, and support team building. In 2023, our PRSS Mentoring Initiative (PRSSMI) collaborated with 10 diverse mentor sites from across the country, including recovery community organizations, health networks, local police departments, rural and tribal communities, and peer-led nonprofits.

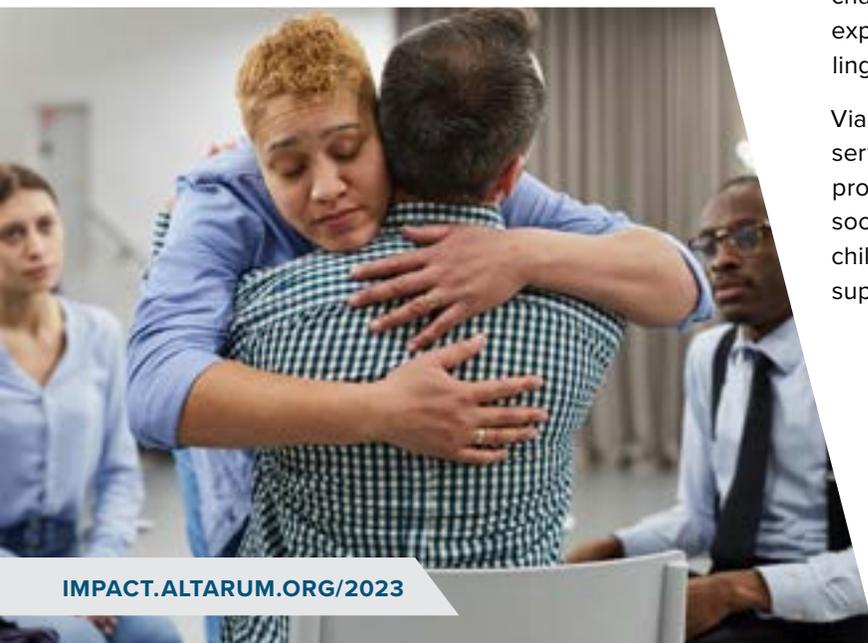
PRSSMI pairs an organization new to peer integration with an established PRSS organization, providing peer-to-peer learning and networking opportunities. The PRSSMI has enabled more than 100 participants to exchange promising approaches, share effective programming strategies, and receive TTA support.

“Our mentoring initiative has steadily evolved since its inception in 2018,” says Altarum’s Community Health Project Director Tiffany Lombardo. “This year, we had 10 matches and 10 mentor sites from across the country. We conducted a comprehensive evaluation involving our mentees and mentors, yielding overwhelmingly positive feedback—a pivotal highlight in our journey. We’ve set the standard as the model for how to do this within BJA, which is phenomenal for all involved.”

Altarum has more than 25 years of experience successfully implementing TTA and other complex projects on a national scale. We have supported state, tribal, and territorial efforts to respond to substance use, reduce overdose deaths, and support treatment and recovery services. Altarum brings together technical expertise and lived experiences to offer a unique approach to supporting project implementation, enhancement, and evaluation.

Altarum is collaborating with two highly qualified partners on this initiative: Faces & Voices of Recovery (F&V) and Change Matrix (CM). They offer diverse, peer-led perspectives and contribute invaluable expertise to our work. F&V is a national, peer-led, nonprofit organization dedicated to mobilizing individuals in recovery, their families, and allies, to promote recovery. CM is a woman-owned, minority-owned, small business that works to motivate, manage, and measure change to improve lives. Their team provides skills and experiences in health disparities, equity, and cultural and linguistic competence.

Viable PRSS increase access to substance use and recovery services, decrease social barriers to care, reduce costs, and provide valuable support in navigating complex health and social services systems. Especially in the criminal justice and child welfare systems, individuals can benefit greatly from the support of a peer with lived experiences.



## Strengthening Trust in FDA's Center for Drug Evaluation and Research Through Strategic Communications



The U.S. Food & Drug Administration (FDA) recognizes the importance of trust—a key intangible factor that facilitates its work as a regulator. This is especially true with the FDA's Center for Drug Evaluation & Research (CDER), the arm that ensures safe and effective drugs are available, from newly developed prescription drugs to generics to over-the-counter medicines. Some consumers might not fully understand the complex agency, which regulates goods that account for some 20% of U.S. consumer spending. Others question whether corporate or political influence could sway the vital agency, while others still have been victims of misinformation. FDA CDER turned to Palladian for help in communicating more strategically, clearly, and simply with key audiences about its vital work to regulate medicines.

Agency staff and the Palladian team agreed that a strategic communications plan would be instrumental in building understanding and trust. The planning process would need to analyze the landscape in which drug regulators were doing their work. And to hear directly about stakeholders' experiences with agency communications, the planning team would need to interview a broad range of them. Several made the same request: demystify complex scientific and regulatory information and make it more accessible. This phase of work helped Palladian understand CDER's situation and begin to uncover the most promising path forward—one that embraced plain language as an enabler of public trust.

Internal stakeholders were just as central to the strategic planning process as external ones. That's because Palladian believes every organization's imperative is to clearly, compellingly paint a picture of its destination, but we also believe that every employee and branch of the organization has a role in how that picture turns out. The next phase of the project was to forge internal consensus, drive alignment, generate excitement, and establish processes that would be catalyze and cement change. CDER's Office of Communications (OCOMM,) felt setting up an internal communications hub would be a crucial tool for managing, updating, and

disseminating all the strong, clear, and consistent messaging that we just developed. So we developed a centralized hub that would help “keep everyone on the same page,” fulfilling a key project objective.

From start to finish, Palladian's collaboration with the OCOMM team spanned leadership meetings, working sessions, content outlines, wireframe development, and much more. The comprehensive effort was premised on the fact that creating a strategic plan is thrilling, but it isn't enough. To achieve the desired results, the plan had to be implemented diligently and consistently for years to come.

The plan and communications hub are new, but OCOMM reports they are already paying dividends: there's a seamless flow of information within the organization, messages are being more effectively conveyed to the public, and the agency can respond more swiftly to emerging issues. It's too early to say whether trust in FDA has increased, but as Benjamin Franklin admonished, “If you fail to plan, you are planning to fail.” That's not a risk FDA was willing to take, and Palladian is proud to have helped put FDA CDER communications on a new trajectory through 2025.

# Empowering Meaningful Conversations About Sexual Health and Well-being for Over a Decade

In 2022, the Centers for Disease Control and Prevention (CDC) awarded Altarum a grant to continue its leadership of the National Coalition for Sexual Health (NCSH) through 2027. Then in 2023, Altarum joined the CDC in celebrating the NCSH's 10th anniversary and the anniversary of their ten-year partnership. Members of the fast-growing coalition, with over 200 in 2023, collaborate to develop evidence-based tools and resources that “promote awareness and acceptance of sexual health as a core element of overall health and well-being across the lifespan.” The NCSH focuses on encouraging and normalizing open dialogue about sexual health between partners, parents and children, healthcare providers and patients, and within communities.

In 2023, Altarum began work on two supplemental projects, building on the strengths and previous work of the NCSH. This work explores two important topical areas of research and communication:

- Creating and implementing a national communications campaign to motivate young adults to talk openly about sexual health and relationship topics
- Testing communication and messaging concepts related to mpox, a disease caused by infection with the mpox virus, and sexual health care among priority populations, the public, and healthcare providers

Adolescence can be a confusing time for young adults with regard to understanding sexual health and relationships and engaging in healthy, open conversations around these topics. By [age 18](#), 55% of adolescents have engaged in sexual activity or intercourse. Despite these statistics, only 29 states and DC mandate sex education in schools, and 13 of these states do not require the content to be evidence-informed, medically accurate, and complete.

The CDC and the NCSH members recognized a need to gain a better understanding of the challenges and barriers U.S. adolescents face in relationships and in their sexual health, and the modes of communications they use to talk about these topics. In response, the CDC asked Altarum to lead a research initiative to gain insights into these issues. Altarum and the NCSH, with assistance from Michaels Opinion Research, conducted a national online survey of over 1,200 young adults, ages 18 to 26, to gather representative evidence to inform future communications. In 2024, the insights from this [analysis](#) will be used to create a communications campaign to motivate young adults and equip them with the skills they need to talk openly with their partners about sexual health and general relationship topics. Altarum established a Young Adult Advisory Group (YAAG) to provide feedback and guidance on concepts and tools for this campaign. Input from the YAAG will help shape the direction of the campaign from the beginning stages until it is launched.

The CDC also approached Altarum and the NCSH in 2023 to ask for assistance researching and leading the development of communication materials to help reduce the burden of mpox on disproportionately affected communities after mpox outbreaks in 2022. Altarum established the Mpox Engagement Team (MET) to research public and provider knowledge, attitudes, and behaviors related to mpox. The team's analyses were used to craft educational communication campaigns around mpox to fill knowledge gaps. Those messages began undergoing market testing in the last months of 2023, to determine which will best resonate with different stakeholders.

Megan Higdon, MPH, Program Director For Sexual and Reproductive Health at Altarum and co-director of the National Coalition for Sexual Health, gives credit for the program's success, in part, to Altarum's “talented team of research and communications analysts, who collaborate with coalition members and the CDC alike to understand how we can best meet the needs of both the public as well as health care providers. We accomplish this by gathering and analyzing data and creating practical evidence-based resources and tools that promote positive and open dialogue about sexual health.”

We are pleased to continue partnering with the CDC in leading the NCSH and working with their many members and volunteers to respond to and advance communications and support around critical sexual health and well-being initiatives. Over the past ten years, we have witnessed enormous growth both in participation and engagement in the program and in the NCSH's impact on providing support and education around sexual health.



## Fighting Misinformation, Complacency, and Other Barriers to Boost Covid-19 and Flu Vaccination Rates Among Older Adults



Two and a half years into the Covid-19 pandemic, it was clear that only a new focused effort could rapidly increase the number of older adults and people with disabilities who were getting boosters and annual flu shots. When the National Council on Aging (NCOA) won a large federal grant for such work, it turned to Palladian for communications and marketing to break through and connect with key audiences in a way that would achieve results.

Data show that older adults, especially from diverse backgrounds, and people with disabilities have faced a disproportionate share of hardships during the Covid-19 pandemic. Underlying health conditions have contributed to the significantly increased risks of serious illness and death these communities face. But so have real barriers to accessing Covid-19 testing, treatment and vaccinations—eminently solvable problems if the right resources and focus are brought to bear.

The federal government realized the significant hurdles it would need to overcome in communicating directly with underserved communities. Enter NCOA and Palladian, which worked together to strategize and prioritize how to drive improvements in vaccination rates. The team took particular note of the high morbidity and mortality rates among Black people from Covid-19—startlingly three times higher than the national average. Data on the experiences of Native American, Alaska Native, Hispanic, and rural communities were deeply worrisome, as well.

On-the-ground organizations most often have the best relationships with the communities they want to engage, but they're frequently strapped for resources and help. So, Palladian's first step was to develop a Quick Action toolkit, empowering NCOA's cross-country network to promote local vaccine-uptake activities. This comprehensive toolkit included turnkey social media content, templates, editable graphics, sample newsletter and online text, and more. The toolkit

sought to reflect the breadth, richness, and diversity of the audiences we were seeking to serve. The team in the field needed a purpose-built tool for the job.

Next, NCOA and Palladian sought to understand people's perspectives on and experiences with accessing Covid-19 and flu vaccinations. We conducted qualitative research and a landscape review; then we dug deeper still. A few insights both troubled and inspired us. We heard some participants describe misinformation efforts directed at them, while others spoke of being unclear on experts' recommendations, a lack of trust in the medical community, or an inability to get to appointments. Still, others said that their initial motivations for vaccination had been overtaken by a desire to "return to normal." It was evident that new, clear, and factual messaging could best help answer these concerns. The messaging needed to be delivered by trusted messengers, and it needed to be delivered in a variety of ways: in community, over TV and radio airwaves, and on social media.

Palladian is now half-way through executing NCOA's "Yes, I'll Be There" national, surround-sound campaign to safeguard lives through greater Covid-19 and flu vaccination rates. Fighting misinformation, complacency, and other serious barriers to care isn't easy. But clear, factual, trustworthy information is the best start to getting people to roll up their sleeves. It's vital that people are there for their appointments, because it also helps assure they'll be there and healthy for all the other things in life they are looking forward to.



## ADVANCING PUBLIC HEALTH

# Advancing Early Childhood Systems and Infrastructure for 20 States for Health Resources and Services Administration Maternal and Child Health Bureau

Recognizing that the early childhood period of growth and development is a critical time in a person's life, the Health Resources Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) established the state Early Childhood Comprehensive System (ECCS) initiative in 2003. Their goal was to create a more effective system of resources and services for children ages 0-5 and their families.

Altarum is proud to have supported the MCHB and the ECCS throughout their 20-plus-year journey, most recently by providing workforce training, infrastructure support, and resources to help HRSA and its 20 state grantees achieve their critical goals of building integrated maternal and early childhood comprehensive systems of care.

It is [well documented](#) that the [first five years](#) of a child's life are critical for long-term developmental, cognitive, and physical well-being. Despite this knowledge, the statistics about the health of mothers and their young children are alarming. The percentage of infants born preterm and/or with low birthweight has been rising since 2013, as has the percentage of children aged 3-17 who have been diagnosed with developmental disabilities (17%). These are ongoing challenges, with disparities intensified by the pandemic, including caregivers who are experiencing significant [decreases](#) in their mental and emotional well-being.

“ *The in-person meeting was one of the best I have ever been to. It was so helpful to attend in person to hear about what other states are doing.* ”

— Representative from a state grantee

STORY CONTINUES ON NEXT PAGE ►

In 2021, the MCHB funded five-year cooperative agreements in 20 states to build integrated maternal and childhood comprehensive systems of care that are equitable, family centered, sustainable, and inclusive of the health system. These multigenerational programs are intended to focus on the prenatal-to-3-year-old population and have five goals:



Implementing these programs, ensuring staff are trained to administer the grants, and facilitating stakeholder collaboration requires program management and training to deliver effective change.

Altarum is providing intensive support to the 20 state grantees to achieve the five goals through the Early Childhood Systems Technical Assistance and Coordination Center (ECS-TACC). The ECS-TACC supports state teams to strategize partnerships, build staff capacity and skills, facilitate stakeholder collaboration, and envision a state infrastructure necessary for building comprehensive services to children and families.

Among its diverse array of activities, the ECS-TACC has facilitated over 418 technical assistance encounters, with a significant portion dedicated to empowering family leadership. Additionally, the center has conducted site visits and organized numerous training events, such as state partner meetings, evaluation planning sessions, and communities of practice gatherings. Through this technical assistance, the ECS-TACC supports these 20 states in the completion of asset and gap analyses, state early childhood strategic plans, evaluation plans, and annual reports. Altarum works with subject matter experts, from Morehouse School of Medicine, Georgetown University, the American Academy of Pediatrics (AAP), the Association of Maternal & Child Health Programs (AMCHP), the Center for the Study of Social Policy (CSSP), and the Children and Adolescent Health Measurement Initiative (CAHMI).

Florence Rivera, Program Manager for Altarum, said, “Each stakeholder, such as the healthcare systems and the many state programs like Title V and Medicaid, has their own way of supporting young children and their families. However, to successfully achieve the long-term big changes the states envision, you need systemic change and the support systems to make it happen. That’s where Altarum and our partners come in. Altarum brings our experience partnering with state programs and helps provide the bridge connecting stakeholders for implementing these programs.”

“*Being able to hear from Technical Assistant Specialists what they are seeing and hearing across other state teams is helpful. TA sessions feel like therapy—such a relief and so useful.*”

— Representative from a state grantee

Altarum has provided broad research, planning, and evaluative services for the MCHB for more than 20 years. In addition to the ECCS, we have:

- Hosted the inaugural Targeting Health Results for Infants from Vulnerable Environments (THRIVE) event
- [Led a strategic workgroup](#) made up of MCHB staff and staff from 10 historically black colleges and universities to advance discussions and knowledge sharing around maternal and child health
- Led the Innovations in [Newborn Screening Interoperability Resource Center](#), which has a goal of reducing the morbidity and mortality associated with heritable disorders in newborns and children

The implementation and ongoing success of this program is possible due to the relationships Altarum established with the HRSA and our grant partners: James Bell Associates, Change Matrix, Georgetown University Center for Child and Human Development, and the Morehouse School of Medicine Center for Maternal Health. Ms. Rivera explains, “*Altarum understands the unique skill sets that our partners bring to the table to solve the holistic challenges mothers and their young children face. We bring these skill sets together into one cohesive Training and Technical Assistance Center supporting 20 states.*”



## ADVANCING PUBLIC HEALTH

# Fueling Success: Enhancing WIC Nutrition Services Through Training Development and Technical Assistance Support

Since 1974, the federal government’s Special Supplemental Nutrition Program for Women, Infants, and Children has saved lives and greatly improved the health of nutritionally at-risk women and children, studies show. The WIC program, as it is more commonly known, is more than an impactful federal program; it relies on state and local agencies to help provide high-quality nutrition services that have been shown to have positive impacts on birth outcomes, health, and cognitive development. The U.S. Department of Agriculture, the arm of the federal government that runs WIC, relies upon Palladian Partners for strengthening the support for these on-the-ground state and local agencies.

The WIC program requires the state and local agencies’ teams to use its participant-centered, health outcome-based approach to WIC nutrition assessment called the Value Enhanced Nutrition Assessment, or VENA. In short, the VENA approach puts the needs of the participant at the core of WIC nutrition services and identifies and supports their unique healthy behavior goals.

The collaborative efforts of the Palladian team of health communication professionals, in conjunction with Altarum’s Population Health team, have earned recognition from WIC as experts in helping WIC staff and stakeholders across the country on the execution of VENA. Our approach begins with comprehensive formative research, engaging stakeholders from states, regional federal offices, WIC committees, as well as nutrition and health assessment experts. This inclusive process ensures that insights are gathered from diverse perspectives. Next, we leveraged these insights to develop new, empowering guidance for WIC staff and stakeholders, which we then promoted, distributed, and used to help train state and local WIC staff and stakeholders.

In 2023, the Palladian team produced live-action videos, discussion guides, desk references, training modules, and customizable presentation materials. It all works in harmony to provide detailed, important information about how to make

WIC work better for the participants who count on it, as well as to strengthen the skills and capacity of WIC staff nationwide.

Jason Young, President of Palladian, adds, “This work is as mission-centered as it gets, and we routinely hear praise and thanks for providing the on-the-ground staff with what they need to excel.”

Another imperative of our work is to create all materials so that they are as plain-language and as accessible as possible.

Through our collaborative and multifaceted approach, our suite of research-driven work products helps WIC teams across the country to better meet the needs of WIC program participants. That’s a huge win for the millions of women, infants, and children who need and deserve the nutrition and support services that is foundational to their health, learning, and future success.

*With more than 6.3 million women, infants, and children counting on the WIC program every month, it is vital that the program is well-suited to their needs—that is what motivates the Palladian team of WIC experts, registered dietitians, skilled science and health writers, and talented graphic designers.*

## INTEGRATING PUBLIC HEALTH AND SERVICE DELIVERY

# Accelerating Data into Action: A New Data Exchange for Improved Communication about Multi-Drug Resistant Organism (MDRO) Exposure in Orange County, California

The Covid-19 pandemic awakened public health agencies to new aspects of disease surveillance and highlighted the need to modernize infrastructure to better prepare for the next public health crisis. A critical impetus for this modernization effort is the threat of antibiotic resistance within the U.S. health care system, a concern acknowledged by the Centers for Disease Control and Prevention (CDC) and the Infectious Disease Society of America. According to the CDC, each year two million Americans nationwide contract infections from bacteria resistant to antibiotics, resulting in the deaths of 23,000 individuals.

To address this threat, the Orange County Health Care Agency's (HCA) Public Health Services is collaborating with Altarum to develop a MDRO data exchange, called MDRO Xchange. The data exchange will better safeguard public health by minimizing inadvertent exposures to MDROs. The centralized system aligns with the goal of CDC's Data Modernization Initiative to provide actionable insights faster for decision-making at all levels of public health.

Orange County's Public Health Services serves a population of 3.2 million in the third largest county in California. MDRO Xchange will allow acute care hospitals, long-term acute care hospitals, skilled nursing facilities, and local public health agencies throughout Orange County to enter, store, and access data with minimal latency, providing near-real-time updates for patients who test positive for MDROs. The data exchange will have the flexibility to accommodate various logical workflows to ensure the appropriate handling of patients.

Initially, we are partnering with Orange County's Hoag Health System and will steadily incorporate other inpatient health care facilities in the county into the data exchange.

"We are committed to assisting facilities in swiftly identifying incoming patients carrying MDROs to implement necessary precautions, thereby preventing the spread of these resistant organisms," says Harrison Kerschner, Altarum Product Manager. "The inpatient facilities will have the ability to check our data exchange to find outliers: people coming from other treatment areas" where MDRO status may not be recorded.

The data exchange will be able to track new outbreaks and exposure events, securely transmit and receive data in multiple formats, and integrate with other data systems. It will include patient demographics, facility and laboratory

data, case/investigation data, diagnoses, healthcare-associated infection and pathogen data, treatment, and procedures for patients who test positive for MDROs, including *C. auris*, MRSA, ESBL, VRE, and CRE. These data can demonstrate possible transmission within a facility or system, support the implementation of better infection control practices, protect the health of patients and residents, and minimize (or potentially eliminate) inadvertent MDRO exposures.

"When facilities know they are dealing with MDRO exposure, their approach can be preventative, rather than reactive," says Raj Borde, Software Engineering Director, Public Health Interoperability and IT Systems at Altarum. "In addition to protecting the community and care team members, it is going to save the in-patient facilities throughout Orange County time, energy, and money."

For nearly two decades, Altarum has worked to incorporate patient information from multiple sources while helping public health programs integrate data into their systems. We have hands-on experience developing Fast Healthcare Interoperability Resources (FHIR) solutions, collaborating with major electronic health record (EHR) vendors, and working closely with interoperability standards organizations. Our team has specialized expertise in healthcare-associated infection data exchanges, including creating and parsing antimicrobial use and resistance reporting requirements for CDC's National Healthcare Safety Network.

The new MDRO data exchange offers a high-quality user experience, along with a modern architecture and security infrastructure to future-proof the system. Altarum is honored to leverage our expertise to benefit the Orange County community, to improve health equity, and promote population health.

# Building a Strong Foundation: Electronic Case Reporting Modernization with Association of Public Health Laboratories

Electronic case reporting (eCR) is the automated, real-time exchange of case report information between electronic health records (EHRs) and public health agencies (PHAs). This information is crucial for tracking diseases, managing individual cases, and conducting contact tracing to prevent the spread of illnesses. With eCR, public health authorities can promptly provide feedback to health care providers regarding reportable conditions and potential outbreaks. This instantaneous exchange of information is especially vital during public health crises, as it helps in swift response and containment efforts.

Before the Covid-19 pandemic, [fewer than 200 health care facilities](#) in the United States could automatically send electronic health record (EHR) data to state and local public health agencies (PHAs). By mid-2022, that number rose to over 12,500, but many public health agencies are still scrambling today to implement eCR systems.

To assist these agencies in accessing and utilizing eCR data effectively, Altarum collaborates with the [Association of Public Health Laboratories](#) (APHL), providing expertise and implementation assistance. This partnership helps develop the necessary infrastructure and trains staff to facilitate the creation and utilization of eCR.

Healthcare providers are required to share reportable conditions with public health agencies. However, this process is often time-intensive, for some, manual, leading to data errors, reporting delays, and underreporting. The public health agencies require timely, complete data to effectively monitor diseases and outbreaks, yet they face challenges due to varying technical infrastructures, capacities, and capabilities.

To address these challenges, we conduct readiness assessments for PHAs using our proven Altarum Interoperability Methodology (AIM) which forms the foundation for jurisdiction Interoperability Roadmaps. Tailored for each PHA, these roadmaps include timelines, required resources, staff development plans, and a data management plan, providing them with direction on receiving, integrating, and consuming eCR payloads. Additionally, they address security, authentication, authorization, routing, and delivery. With these processes in place, PHAs are equipped to handle eCR mapping, filtering, and data management validation. We also provide toolkits and playbooks on eCR implementation for PHAs to reference.

“During the Covid-19 pandemic, our public health infrastructure was caught off guard,” said Chris Becker, Altarum’s Project Management Manager, Public Health Interoperability and IT Systems. With this APHL collaboration, “We’re benefiting all of public health by making sure the system works for everyone,” he said. “Electronic case reporting is one of the best ways to directly impact the modernization of our public health agencies.”

The demand for support on eCR is significant, underscored by the fact that PHAs in almost a quarter of the U.S. states have sought assistance from Altarum, many with multiple requests. This widespread outreach highlights the pressing need for guidance and expertise in implementing and optimizing eCR systems and the growing recognition of eCR’s importance in modern public health surveillance, underscoring the critical role that Altarum and APHL play in facilitating its successful adoption nationwide.

The efficiency, reliability, and completeness of the eCR process have the potential to improve population health in several ways, including saving time and resources for PHAs and reducing administrative burdens for health care providers. eCR benefits everyone involved in case reporting by providing timely, comprehensive data compared to manual reporting, thereby alleviating the workload for both healthcare facilities and public health staff.

“As soon as a reportable condition for a patient is entered into the provider’s EHR system, PHAs receive a validated electronic version of that data, enabling them to monitor disease outbreaks and public health emergencies efficiently. This has a significant impact on public health,” said Sujata Mallik, Altarum’s Public Health Interoperability and IT Systems Manager.

Altarum draws on our rich experience in public health information technology implementation and surveillance for this project. In 2004 we designed, and continue to operate, the MDHHS public health gateway and data quality tool. Additionally, we provided integration engine expertise for the Washington State Department of Health and established the [Innovations in Newborn Screening Interoperability Resource Center](#) for screening programs nationwide to advance interoperability and reduce morbidity and mortality.

## SCALING HEALTH INFRASTRUCTURE

# Advancing Public Health Through Innovative Vital Records Interoperability

The fields of public health and epidemiology gained momentum in the [late 1800's](#) in the United States, as data tracking illuminated the profound impact of sanitary conditions on health outcomes. Over the past century, public health data collection has evolved significantly, yet challenges continue to arrive from outdated processes and technology, coupled with limited interoperability across various public health jurisdictions, providers, and community programs.

Altarum's Public Health Systems team has been leveraging our Fast Healthcare Interoperability Resources (FHIR), Rhapsody, and overall interoperability development and implementation expertise to help organizations like the Centers for Disease Control and Prevention (CDC) and state departments of public health modernize their systems. We're increasing both the speed of data delivery and trust in the completeness and accuracy of the information being delivered to and from state public health to federal reporting systems.

Nationwide initiatives are underway to revamp the collection of vital statistics, exemplified by the CARES Act of 2020, which allocated \$75 million towards [modernizing the National Vital Statistics System](#) (NVSS). This initiative includes the implementation of FHIR-based connections between jurisdictions' electronic data registration systems and the CDC's National Center for Health Statistics, facilitating quicker and more automated sharing of vital statistics between state and national levels.

Significant strides have been made in death records reporting. The CDC reports that around 2.6 million U.S. deaths undergo analysis annually via the NVSS. Notably, in 2023, 63% of these deaths were reported to the CDC within 10 days, marking a notable increase from the 2010 figure of 7%. It's worth highlighting that the ultimate objective for all jurisdictions is to promptly report registered deaths to public health agencies within a single day, emphasizing the ongoing commitment to enhancing the efficiency and timeliness of vital statistics reporting nationwide.

An example of Altarum's impact on this initiative is our partnership with the Michigan Department of Health & Human Services (MDHHS) and state registrar. Together, we are actively involved in updating processes and systems for transmitting death records to the state registry, as well as pioneering the development of Rhapsody FHIR APIs to deliver aggregated near real-time data to the NVSS. These data serve diverse purposes, from detecting public health emergencies to



supporting awareness campaigns and preventing fraudulent payments, benefiting public health organizations, payers, and providers alike. By leveraging FHIR to streamline data input into the registries, we ensure that end users receive critical data faster.

In a significant recognition of Michigan's commitment to advancing public health informatics, the Division of Vital Records and Health Statistics (DVRHS) at MDHHS has achieved certification for Mortality FHIR with the CDC's National Center for Health Statistics (NCHS). This achievement, made possible through the implementation of Altarum's Electronic Death Registration FHIR Messaging System solution, underscores Michigan's leadership in leveraging cutting-edge technology to enhance public health outcomes. This recognition not only validates Michigan's commitment to innovation but also highlights the state's pivotal role in driving advancements in public health informatics.

Sandra Marshall, Director of Public Health Interoperability at Altarum, expressed her pride in the team's accomplishment, stating, "I am incredibly proud of our team for their dedication and hard work in guiding MDHHS to this certification. This coordinated accomplishment reflects our commitment to driving innovation and excellence in public health IT, and I am confident that it will contribute to our collective efforts to improve health outcomes for all."

By harnessing data from EHR systems and facilitating seamless communication with other health IT systems, Altarum contributes significantly to the collection and dissemination of vital health information. Our efforts bolster the trustworthiness and accuracy of vital birth and death data, while the adoption of FHIR standards ensures swifter access to this data. This, in turn, enables downstream organizations to leverage data effectively for public health interventions, epidemiological research, and a comprehensive understanding of health care dynamics.

## SCALING HEALTH INFRASTRUCTURE

# Developing Operational Roadmaps for State Success in Improving Public Health Interoperability

In today's ever-evolving landscape of public health, timely, standardized, and aggregated health care data stands as the cornerstone of effective public health programs. As we confront new and increasingly complex threats, the imperative to modernize has never been more pressing. To stay ahead of emerging challenges, it is essential that every component of the public health ecosystem—from local communities to regional and national networks—communicates seamlessly in real time. However, achieving this level of connectivity poses significant technical hurdles for public health organizations. The existence of multiple information systems, competing standards, and diverse data formats, in addition to staff capability and capacity, creates formidable interoperability challenges.

In alignment with the Centers for Disease Control and Prevention's (CDC) [Data Modernization Initiative](#) (DMI), an effort to modernize data across the federal and state public health landscape, Altarum has helped many U.S. states' departments of health and human services enhance data sharing capabilities specifically through comprehensive interoperability assessments and roadmap development.

Our team employs the Altarum Interoperability Methodology (AIM). AIM is a proven methodology that consists of a systematic process that includes conducting a readiness assessment, requirements gathering (e.g., current and future desired data models), staff and organizational capacity. We have a strong foundation of hands-on experience developing Fast Healthcare Interoperability Resources (FHIR) solutions, collaborating with major electronic health record (EHR) vendors, and working closely with interoperability standards organizations.

Our approach is flexible, tailored to meet each state's unique needs and current position in the interoperability journey. Whether a state is just beginning to explore interoperability solutions or seeking to enhance existing systems, Altarum collaborates closely with state leadership to develop a comprehensive Interoperability Roadmap. This detailed plan provides a path forward for the state to achieve its desired interoperability goals and helps state leadership and funding sources understand and appreciate the effort needed to achieve effective and efficient data sharing.

Altarum has improved public health interoperability for many states with tangible improvements, such as streamlined data exchange processes, enhanced data quality, and increased accessibility to vital health information.

- ***In Kentucky***, as part of the HRSA-sponsored Innovation in Newborn Screening Interoperability program (INBSI), we helped the state create a roadmap to improve the highly manual, time-intensive hospital/state lab data-sharing process for newborn dried blood spot testing and reporting. This program screens blood spots for a wide variety of inherited and congenital disorders. We put together a detailed roadmap with guidelines on how the Kentucky state lab could work with the state Health Information Exchange (HIE) to streamline data sharing. It was sufficiently detailed for Kentucky to engage a technology partner and hit the ground running to make successful changes, automating the data transmittal processes.
- ***In Tennessee***, we are actively working with the Tennessee Department of Health's (TDH) Office of Informatics and Analytics (OIA) to assess their current interoperability capacity and infrastructure. We are developing a set of interoperability modernization recommendations for TDH by evaluating OIA's current electronic data exchange engines, data governance, and compliance structures. The assessment findings and recommendations, along with the workforce training we will provide, will be used to help guide immediate and longer-term TDH data modernization initiatives.
- ***In Washington***, Altarum worked with the Washington State Department of Health (DOH) to conduct a focused assessment of dataflow, systems, and workflow issues. We provided technical and subject matter expertise regarding best practice electronic laboratory reporting (ELR) management and provided support for the development and implementation of technical solutions to streamline and improve current system monitoring functionality. We believe that providing our clients with the training and skills to manage their improved interoperability systems is critical for the ongoing efforts of the state. We worked with state workers to train them how to use Rhapsody and provided training to the client to support onboarding of ELRs. Altarum continues to implement solutions and is assisting the WA DOH in maintaining operation of their Covid-19 Surveillance and Informatics programs.
- ***In Michigan***, Altarum's assessments and architecture design resulted in the development of the Michigan Department of Health & Human Services (MDHHS) Public Health Gateway. Altarum designed, developed, and operates the public health gateway and data quality tool, which is the single point of entry for Health Level Seven (HL7) International's Version 2 (v2) messages and Consolidated-Clinical Document Architecture (C-CDA) for several public health programs.

By leveraging our expertise and experience, Altarum empowers states to overcome interoperability challenges and advance their public health data management capabilities, ultimately contributing to the overarching goals of the CDC's DMI and improving health outcomes for communities nationwide.

“*Data is the oxygen that powers our ability to detect and respond to threats to health and we are at a pivotal moment in the modernization of the public health data infrastructure.*”

— Dr. Mandy Cohen, CDC Director



## Our Values

---

FOR A GREATER GOOD

OWNING OUR FUTURE

SUCCESS THROUGH SERVICE

EXCELLENCE TOGETHER

INFORMED AND INCLUSIVE

INTEGRITY FIRST



## About Us

---

Within the Altarum enterprise, a vibrant synergy thrives among our entities. Comprising four divisions—Population Health, Public Health Systems, Palladian Partners, and Altarum Medicare Medicaid Services for States (AMMS)—each facet contributes unique expertise. Together, they harmonize to deliver unparalleled solutions and innovation to our clients.

## CAREERS

# Join Us in Improving and Shaping the Future of Public Health and Health Care Delivery

Our team members play a critical role in shaping a better future for all. We are a community of passionate individuals who are committed to creating positive change. Our mission-driven culture fuels our dedication to improving health and health care.

The stories in this Impact Report showcase the significant contributions and transformative outcomes our team has achieved in 2023. Every member of our team contributes to projects that directly influence and enhance the well-being of communities, families, and individuals nationwide. From research and policy development to innovative health care solutions, each day at Altarum presents new and meaningful challenges that make a difference.



[VISIT ALTARUM.ORG TO EXPLORE OPPORTUNITIES](https://www.altarum.org)

## AFFINITY BOARD

# Empowering Culture & Community Initiatives



Our Affinity Board actively enhances communication and collaboration, advocating for diversity, equity, and inclusion while propelling cultural initiatives forward.

Together, our board members foster meaningful opportunities that celebrate various cultures, build a strong sense of community, and encourage profound connections among our colleagues.

*Experience Ignites Innovation*  
**SHAPING TOMORROW'S HEALTH TODAY**



[altarum.org](https://altarum.org) | [info@altarum.org](mailto:info@altarum.org)

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



**LEARN MORE ABOUT  
ALTARUM'S IMPACT**

**OUR OFFICES**

**Novi, Michigan**  
Lake Pointe Office Center  
26200 Town Center Drive,  
Suite 350  
Novi, Michigan 48375  
734.302.4600

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

**Portland, Maine**  
4 Milk Street  
Suite 303  
Portland, ME 04101  
207.772.1410

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