

FEASIBILITY

SACIM

Health Coverage & Continuum of Services			
A	campaigns & coverage clinical preventive services	8	8
B	Medicaid interconception care	7	8
C	Medicaid health homes/chronic conditions	8	8
D	Medicaid family planning SPAs	8	8
E	automatic newborn eligibility	8	9
F	monitor essential benefits packages	9	7
G	behavioral, mental health, oral, obesity	7	7
Quality /Patient-Centered Care			
<i>Workforce</i>			
H	implement of ACA workforce provisions	9	8
I	implement ACA primary care incentives	9	9
<i>Quality and Safety</i>			
J	quality improvement collaboratives	7	8
K	CMS innovation grants	10	9
L	evidence-informed practices, flexible funds	6	8
<i>Delivery System Structures</i>			
M	patient-centered medical (health) homes	9	9
	community health teams	7	7
	community care networks	7	7
	accountable care organizations (pediatric)	8	8
N	Strong Start	10	
<i>Informing & empowering families</i>			
O	immunization	7	9
P	campaigns on warning signs for pregnant/infant	7	9
Q	breastfeeding	6	9
MCH Safety Net			
<i>Discretionary programs</i>			
R	Healthy Start transformation	7	8
S	Maintain ACA funds for MIECHV, FQHC, PH	10	7
T	Protect Title V and Title X funding	8	7
U	WIC	8	

	Health Equity & Disparities		
v	Add SACIM to list of HHS Initiatives	8	9
y	Concentrated community development	5	7
w	social support	4	8
x	cultural competency	5	7
y	Address income support TANF, etc.	5	7
z	investments in early childhood/families	5	7
	Data, Monitoring, and Surveillance		
aa	TA to states re Vital Statistics	6	8
bb	PRAMS in every state	6	8
cc	Standardized Medicaid perinatal data	8	8
dd	Special survey focus	8	8
ee	CHIPRA and ACA quality measures	10	8
	Interagency public/private collaboration		
ff	Prevention Council work on IMR with SACIM	6	8
gg	Support action on calls for action	6	9
hh	Crosswalk National Prevention Strategy	6	8
ii	Build on Region IV and VI initiative	9	8
jj	increase funding for research & translation	9	7
kk	Focus resources on prevention	7	7
ll	NICHD position on SACIM	5	9