

List of Hypotheses and Corresponding Design Approach

Hypothesis	Design Approach					
	Regression Discontinuity	Stabilized Inverse Probability of Treatment Weighting				
		Pre-Post Comparison	Provider Network Adequacy (Geospatial)			
			Qualitative Interviews and Surveys			Secret Shopper Surveys
Access						
a. ARWorks beneficiaries will have equal or better access to care, including primary care and specialty physician networks and services.	X	X		X	X	X
b. ARWorks beneficiaries will have lower non-emergent use of emergency room services.	X	X				
c. ARWorks beneficiaries will have lower rates of potentially preventable emergency department and hospital admissions.	X	X				
d. ARWorks beneficiaries who are young adults eligible for EPSDT benefits will have at least as satisfactory and appropriate access to these benefits.			X			
e. ARWorks beneficiaries will have appropriate access to non-emergency transportation.	X	X				
Care/Outcomes						
a. ARWorks beneficiaries will have equal or better access to preventive care services. (P – Primary Prevention; S – Secondary Prevention; T – Tertiary Prevention)	X	X			X	
b. ARWorks beneficiaries will report equal or better experience in the care provided.	X	X				
c. ARWorks beneficiaries will have appropriate access to non-emergency transportation.	X	X				
d. ARWorks beneficiaries will have lower rates of potentially preventable emergency department and hospital admissions.	X	X				
Continuity						
a. ARWorks beneficiaries will have fewer gaps in insurance coverage.	X	X				
b. ARWorks beneficiaries will maintain continuous access to the same health plans, and will maintain continuous access to providers.	X	X				
Cost-Effectiveness						
a. ARWorks beneficiaries, including those who become eligible for Exchange Marketplace coverage, will have fewer gaps in plan enrollment, improved continuity of care, and resultant lower administrative costs.	X	X				
b. ARWorks will reduce overall premium costs in the Exchange Marketplace and will increase quality of care.	X	X				

c. The cost for covering ARWorks beneficiaries will be comparable to what the costs would have been for covering the same expansion group in Arkansas Medicaid FFS in accordance with STC (Standard Terms and Conditions) 68 on determining cost effectiveness and other requirements in the evaluation design as approved by CMS.	X	X				
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