General impact metrics	Measures	Acertainment	Why measure this?	Priority level (high/low)	Timing**
Financial					
Start-up costs	Project management (staff hours, consultant hours, expenses, travel, training) Time/effort of PCPs, specialists, referral coordinators (i.e., workgroups, training) Technology costs (platform, licenses, contracts)	Self reported by grantees and their partners; and ascertained by provider survey	Identify initial investment	High	one-time, phase 3
Ongoing costs	Hardware/software licensing $ Staffing to support system (salary, effort) PCP/specialist incentives/payment	Self reported by grantees and their partners; and ascertained by provider survey	Identify ongoing project expenses	High	one-time, phase 3
Utilization	# specialty visits/population served (in-person + eConsult patients) diagnostic testing/population served pre vs. post implementation (testing entities to be determined by eConsult specialty) Total # of referrals (eConsults + regular referrals) compared to same season previous year	Passive: eCR platform & health system metrics	Indrect measure for business case Unanticipated costs	High Low High	ongoing, phases 3-4
System efficiency	% of in-person consults that receive preconsultative guidance before in-person visit (>1 avoided visit) % of eConsults never scheduled (likely >1 avoided visit) and why eConsult specialty clinic show-rate (pre-eConsult vs. post)	Passive: eCR platform & health system metrics	Direct measure for business case	High High Low	ongoing, phases 3-4
Population health and clinical performance					

Overall population in health system	Demographics (ex: age, gender, race/ethnicity, language, insurance status) of the population served
	Demographics (MD vs. NP) of providers in the system
	PCP referral rates (eConsult + regular consult)/standardized panel size
	Characteristics of the health delivery system and primary care clinics
	  PCP turnover
	  Salaried vs. FFS specialist providers
	  Existance of referral coordinating center or referral managers for PCCs
		Passive: health system metrics	Determine generalizability, particularly for health plans	High, but data depend on partnerships	one-time, phase 2

Population directly served by eConsult	Demographics (insurance status) of patients who received an eConsult % of patients who receive specialty expertise via eConsult, normalized to clinic volume # of specialties offering eConsult and what they are	Passive: eCR platform & health system metrics	Measure of program reach and impact on equity	Low High High	ongoing, phase 3-4
Population indirectly served by eConsult	PCP ability to manage eConsult specialty conditions	PCP survey	Indirect measure of program impact	High	one-time, phase 3
Effectiveness of eConsult process	eReferral disposition (% converted to in-person visit; % that are never scheduled and why); linked back to system efficiency # of exchanges (ping back by specialist) eConsult Clarity of PCP vs. specialist role in consultation (i.e., PCP preference for eConsult vs. in-person)	Passive: eCR platform (if inclued in eCR system)	Direct measure of program impact	Hgih Low High	ongoing, phase 3-4
Provider adoption	% of PCPs that submit at least 1 eConsult; characteristics of PCP affiliation with specialists Clinical entities for which PCP expect eConsult vs. traditional consults Use of eConsult for diagnostic vs. treatment guidance Time spent doing eReferral for PCPs and specialists	Passive: eCR platform (numerator) and health system metrics (Denominator and affiliation data) PCP survey PCP survey PCP and specialist surveys	Adoption drives impact	High	survey is one-time, phase 3; PCP use is ongoing, phases 3-4
Efficiency of in-person visits	Ease of specialist identification of reason for consult for scheduled eConsults vs. traditional referrals Specialist identification of initial evaluation for eConsults vs. traditional referrals	Specialist survey	Impact on efficiency; important for adoption by specialists	High	one-time, phase 3
Patient safety	% of eConsults leading to referral that were not anticipated by PCP (discordance in diagnosis/need for in-person visit) Unclosed loop-PCP: % unscheduled unopened eConsults or not closed after 6 months by PCP (if no active close button) Unclosed loop-specialty: % of eConsults that did not receive a specialist response	Passive: eCR platform (if exists) or PCP survey Passive: eCR platform Passive: eCR platform	Unanticipated impact	High	ongoing, phases 3-4
Access to specialty care	Average time to eConsult response Time to third next available in-person appt for eConsult specialties (3mo pre vs. post implementation) Referrals to outside specialists for patients were not scheduled after eConsult review; each system will have to define what "outside" means	Passive: eCR platform Passive: health system metrics Chart review	Direct measure of program impact Unanticipated impact	High Low	ongoing, phases 3-4
Patient experience					
Patient experience	Satisfaction (vs. unsatisfaction) with access to specialty care in general Concern re: limitations in care Patient acceptability of having an eConsult … for preconsultative guidance … in lieu of an in-person specialty care visit Travel/time saved by patients for avoided clinic visits	Case series of phone interviews of 3-5 patients per specialty who received and did not receive an eConsult	Spread/generalizability; Stories provide nice examples for policy makers re: impact	Low	one-time, phase 2
Provider and care team experience					

Provider satisfaction	PCP satisfaction/dissatisfaction
	  for clinical purposes
	  integration with workflow and amount of time spent
	  ease of use/technology
	  access to specialists
	  appropriateness of reimbursement (if any)
		PCP survey	Direct measure of program sustainability	High	one-time, phase 3

	Specialist satisfaction/dissatisfaction
	  for clinical purposes
	  integration with workflow and amount of time spent
	  ease of use/technology
	  appropriateness of reimbursement (if any)
	  relationship with primary care providers
		Specialist survey			

Staff satisfaction	MEA/RN/referral coordinator satisfaction/dissatisfaction
	  integration with workflow
	  Ease of use/technology
		Survey			