Framework for Evaluating External Products and Services

Developed by the PALTmed CMO Network

This framework was developed by the CMO Special Interest Group (now called the CMO Network) in early 2026, through direct dialog and an iterative review of document drafts leading to this final version, and was endorsed by the group in June 2026. The goal is to support CMOs and other clinical leaders in evaluating external products and services, to guide consistent decision-making that considers all essential factors, and to lay the groundwork for successful implementations.

I. Purpose of the Framework

- Provide guidance for evaluating external products and services, including optimal processes and criteria to be applied
- Support CMOs, Medical Directors, and facility leaders in making responsible, value-driven decisions
- Promote reproducible and consistent evaluation practices

II. Guiding Principles (Core Values)

Evaluation decisions should reflect the following principles:

- Mission Alignment
- Clinical Integrity
- Patient and caregiver centered
- Responsible Innovation
- Risk Awareness and Mitigation
- Operational Feasibility and Sustainability
- Organizational Trust and Leadership

III. When This Framework Should Be Used

This framework should be applied when evaluating products and solutions for the post-acute and long-term care setting, including (but not limited to):

- Clinical technologies
- Remote patient monitoring tools
- AI-enabled tools
- Pharmacy or therapeutic services
- Staffing or clinical support services
- Quality improvement tools
- Workflow or documentation platforms

IV. Evaluation Pillars

Pillar 1: Alignment with Standards of Practice & Quality of Care

- Does the product/service support recognized evidence-based clinical standards?
- Does it improve patient outcomes or safety?
- Does it create new potential clinical risks?
- Does it promote appropriate patient selection, ensuring that the product utilization decision is made at the patient level based on medical need? (Does it avoid inappropriately application or delivery to patients without clinical indications and who are unlikely to benefit?)
- Will the product/service improve the patient, family, and caregiver experience?

Pillar 2: Clinical & Operational Fit

- Who will spearhead and champion the initiative at the local/facility level?
- Will the workforce realistically adopt and utilize the product or solution?
- Will it create care efficiencies, or disrupt care delivery?
- What training is required, what additional training burdens will be created, and how will ongoing training be ensured with changes or turnover in staff?
- How will staff competency be maintained, particularly for services that are infrequently utilized?
- Does it create administrative burden for facility administration, clinical staff, and/or providers?
- Does the product/service require physical resources at the facility?
- How will the product/service be monitored, by whom, and what metrics will be utilized to measure success?

Pillar 3: Compliance, Regulatory, & Legal Risk

- Does the product/service create compliance risk?
- Does the vendor interpretation of compliance align with internal compliance standards?
- How will any compliance, regulatory, or legal risk be monitored and mitigated?
- Does the product/service raise concerns related to OIG guidance?
- Has the vendor been subject to sanctions or Medicare exclusions?
- Have potential conflicts of interest been identified and addressed, in the evaluation process as well as post-adoption?
- Will patient consent be required, and if so, how will it be obtained?
- Does the product/service require specific licensure, accreditation, or waivers?
- Is FDA clearance applicable or required, and if so, has it been obtained?
- How will PHI and other sensitive information be collected, transmitted, stored, and destroyed?
- Are appropriate business associate agreements, cybersecurity controls, and breach obligations in place?

Pillar 4: Financial & Strategic Impact

- Cost vs. value, and to whom does the value accrue?
- Total cost of ownership/adoption, including indirect costs and impacts
- Opportunity cost, if adoption deprioritizes other initiatives
- Realistic, internally vetted ROI expectations
- Financial risk exposure
- Sustainability of the offering

Pillar 5: Vendor Credibility & Transparency

- How solid is the evidence supporting claims?
- References from similar organizations, caring for similar populations in the PALTC setting
- Transparency in pricing and performance metrics
- Responsiveness to clinical and operational concerns
- Willingness to support pilot programs or limited rollout
- Is the vendor likely to be stable and reliable over the course of the planned partnership?

V. Evaluation Process

Medical leaders are encouraged to play a major role in evaluating external products and services for the post-acute and long-term care setting, working closely with operational and financial leaders

Stepwise Approach

- Screening – The product or service should initially be screened against the above pillars to identify red flags or reasons why a full evaluation would not be warranted.
- Full Evaluation – If the product or service appears satisfactory to initial screening, a thorough review of the pillars above should be performed by an interdisciplinary team, ensuring that diverse perspectives are incorporated.
- Pilot – If full-scale deployment carries significant investment or risk, a smaller-scale pilot may be considered, and should be tied to clear success metrics and a pilot timeline for consideration of expansion or discontinuation. (Note that such a pilot may be important to differentiate from a true research study, for the purposes of IRB oversight.)

Role of the CMO and Medical Director

- The CMO or Medical Director should participate in the clinical review of the external product/service, and may lead the process, with attention to the following:
    - Ensure clinical integrity of organizational decisions.
    - Advocate for patient-centered care.
    - Serve as bridge between clinical and executive leadership.
    - Identify risks related to inappropriate utilization.
    - Incorporate interdisciplinary input.
    - Collect and review data on clinical effectiveness and impact.
- The CMO or Medical Director should recuse themselves and seek an alternate source of clinical input for situations involving a potential conflict of interest.