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**State Demonstrations Group**

JAN 18 2010

Jason Helgeson  
Director, Office of Health Insurance Programs  
New York State Department of Health  
Empire State Plaza  
Corning Tower (OCP – 1211)  
Albany, NY 12237

Dear Mr. Helgeson:

This letter is to inform you of the Centers for Medicare & Medicaid Services (CMS) decisions regarding New York's request for changes to *Attachments I: DSRIP Program Funding and Mechanics Protocol* and *Attachment J: DSRIP Strategies Menu and Metrics Protocol* for the 1115 Medicaid Redesign Team Demonstration (Project No. 11-W-00114/2). CMS carefully considered each of these requests in making a determination. Below we outline our decisions.

***Request to allow for partial payments for "Partial Achievement Values (AV)" when determining incentive awards***

CMS understands the potential benefits to allowing performing provider systems (PPS) to receive payments for partially meeting performance goals. However, we require a more complete set of measures than is available at this time to fully evaluate the request. We look forward to continuing conversations to address New York's request.

***Request to delay the conversion of several Preventive Quality Indicators (PQI) and Pediatric Quality Indicators (PDI) performance measures from pay for reporting (P4R) to pay for performance (P4P) for one additional demonstration year***

Several of New York's measures were affected by the national conversion of International Classification of Diseases (ICD) version 9 to ICD-10. Specifically, DSRIP Demonstration Year 2 (DY2) spanned ICD-9 and 10. CMS agrees with New York's concerns about trending across ICD versions and approves the request to delay the conversion of PQI and PDI measures to allow the baseline to be based on ICD-10 only. These changes are included in the revised *Attachment J: DSRIP Strategies Menu and Metrics Protocol*, included as an attachment to this letter.

(Helgerson, page 2)

***Request to convert quality measures related to the Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CG-CAHPS) for the uninsured population (project 2.d.i) to P4R for the programs remaining three demonstration years***

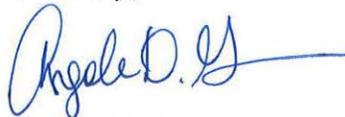
While CMS appreciates the challenges of data collection for the CG-CAHPS for the uninsured measure, we deem this survey data to be important to hold PPSs accountable for achieving the project 2.d.i. goals. At this time, we cannot accommodate New York's request to convert the measure to P4R for the remainder of the demonstration.

***Request to adjust the methodology used to determine pay for performance AV awards across CG-CAHPS measures***

CMS understands the difficulty of improving on measures for which there is already a high performance. However, we suggest that a preferred approach may be to retire or replace measures for which there is little or no room for improvement. Therefore, we cannot approve this request at this time.

We look forward to continuing to work with you and your staff on the demonstration. If you have questions or concerns, please contact your project officer, Adam Goldman at (410) 786-2242, or by e-mail at [Adam.Goldman@cms.hhs.gov](mailto:Adam.Goldman@cms.hhs.gov).

Sincerely,



Angela D. Garner

Director, Division of System Reform Demonstrations

cc:

Michael Melendez, Associate Regional Administrator, CMS New York Region