

December 2013 MRT Waiver Amendment Status and Crosswalk to August 2012 Submission

New York has revised its strategy to move forward with the MRT Waiver Amendment based on feedback from the Centers for Medicare and Medicaid Services (CMS). This feedback outlined what reinvestment strategies could be implemented through a statewide Delivery System Reform Incentive Payment plan comprised of multiple **DSRIP programs**, through **managed care contract requirements**, and through **state plan amendment**. Some reinvestment strategies were deemed “**unfundable**” by CMS including capital, rental subsidies, evaluation, regional planning, and health information technology.

The state’s DSRIP plan strategy is to reduce avoidable hospitalizations by 25%. The programs included in the DSRIP plan and strategies to implement through managed care contracts and state plan amendment tie back very closely to the goals of the state’s original MRT waiver amendment request. The state went through a detailed stakeholder engagement process to develop that original request, and while CMS has stated that it is not approvable in its original form, the integrity of that stakeholder engagement process must be maintained.

The chart below is a crosswalk between the reinvestment programs proposed in New York’s August 2012 MRT Waiver Amendment submission, and the current status of each program. Documents with further detail on the state’s DSRIP plan and its focus areas, and managed care and state plan amendment strategies are available on the MRT Website.

August 2012 MRT Waiver Amendment Programs	Current Program Implementation Strategy
1. Primary Care Expansion	
1) Technical Assistance	Managed Care Contract Requirements
2) Expand Capacity and Accessibility:	-
2a) Capital Investment	Unfundable
2b) Operational Assistance	Managed Care Contract Requirements
2c) Health IT Assistance	Unfundable
2. Health Home Development Fund	
1) Member Engagement and Public Education	State Plan Amendment
2) Staff Training & Retraining	State Plan Amendment
3) Health Information Technology Implementation	State Plan Amendment
4) Joint Governance Technical Assistance and Start Up	State Plan Amendment

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3. New Care Models		
1) New Care Models - Funding Opportunities		DSRIP Focus Area #1
2) Quality Pool		
4. Expand Vital Access Provider Program & Safety Net Provider Program		
1) VAP and Safety Net Provider Program		DSRIP Focus Area #1
5. Public Hospital Innovation: New Models of Care for the Uninsured		
1) Intensive Care Coordination / Case Management Initiative		Similar programs and related strategies are included in DSRIP Focus Area #1
2) Expanding the Concept of "Hot Spotting" to Uninsured		
3) Primary Care Expansion		
4) Primary Care and Care Management Expansion for Other Public Hospitals		
5) Quality Pool		
6. Medicaid Supportive Housing Expansion		
1) Supportive Housing Capital Expansion Program		Unfundable
2) Supportive Housing Services Program		DSRIP Focus Area #1
7. LTC Transformation & Integration to Managed Care		
1) Nursing Home Transition		While some of the August 2012 proposed reinvestment strategies in this area were deemed unfundable by CMS, the DSRIP plan includes Focus Area #2 with programs targeted to Long Term Care Transformation.
2) ALP Investment		
3) NY Connects		
4) Quality Improvement - MLTC		
5) HIT Investments		
6) Ombudsperson		

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8. Capital Stabilization for Safety Net Hospitals		
	1) Technical Assistance to Safety Hospital Boards	DSRIP Focus Area #1
	2) Transitional Capital for Hard Assets	Unfundable
	3) Operational Restructuring	DSRIP Focus Area #1
9. Hospital Transition - K. Westervelt		
	1) Technical Assistance	DSRIP Focus Area #1
	2) Plan Support	DSRIP Focus Area #1
10. Health Workforce Needs in New Era of Health Care Reform - K. Westervelt		
	1) Health Workforce Retraining Initiative	Managed Care Contract Requirements
	2) Doctors Across New York	Managed Care Contract Requirements
	3) Primary Care Service Corp	Managed Care Contract Requirements
	4) Health Workforce Data Respository	Unfundable
	5) Health Workforce Research & Reg Info Center	Unfundable
11. Public Health Innovation - G. Birkhead		
	1) Evidence-Based Preventive Nurse Home Visiting Services	DSRIP Focus Area #3
	2) Asthma Home-Based Self-Management Education and Environmental Assessments	DSRIP Focus Area #3
	3) Diabetes Prevention and Treatment	DSRIP Focus Area #1
	4) Home Visits to Promote Childhood Lead Poisoning Prevention and Treatment	DSRIP Focus Area #3
	5) Water Fluoridation to Promote Dental Health for Children on Medicaid	Unfundable
	6) Address Health Care Acquired Infections and Prevent Sepsis	DSRIP Focus Area #3

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12. Regional Health Planning - K. Westervelt		
1) Regional Health Planning Grants		Unfundable
2) Outside Evaluation and Technical Assistance		Unfundable
13. MRT and Waiver Evaluation Program - P. Roohan		
1) MRT Evaluation (Projects Initiated in MRT)		Unfundable
2) MRT New Waiver Project Evaluation		Unfundable
3) MRT Waiver Project Management		Unfundable