Quality Incentive/Vital Access Provider Pool

Update

April 15, 2015
Agenda

• Introduction
  Mark Kissinger, Director, OHIP Division of Long Term Care, NYSDOH
  John Ulberg, Director, OHIP Division of Finance and Rate Setting, NYSDOH

• Review of QI/VAPP
  Alene Hokenstad, Senior Director, IPRO
  ▪ Background
  ▪ Eligibility

• Plan Attestation
  ▪ Standards for Pool Eligibility
  ▪ Documentation

• Attestation Validation
  Daniel Carmody, Manager, OHIP Division of Finance and Rate Setting, NYSDOH
A. What Is QI/VAPP?

• Program focused on quality home and personal care services in MLTC
• Rewards plans that invest in their network providers
• Funds of 70 million dollars to be distributed to eligible plans, which will then distribute to their contracted qualified incentive pool providers (QIPP)
B. How is a Plan eligible for QI/VAPP funds?

- Plan is in compliance with wage parity statute
  
  (§ 3614-c, Home Care Worker Wage Parity)
- Plan completes revised QI/VAPP Reconciliation excel spreadsheet, distributed March 26, 2015
- Plan submits a QI/VAPP Reconciliation Attestation to DOH - Due May 1, 2015

  - Plans are required to make sure that both they and their contracted providers meet all of the requirements.
  - Documentation is required and will be subject to validation.
  - Failure to meet any of the eligibility requirements will disqualify the Plan from receiving QI/VAPP funds.
Plan Attestation to DOH
Due 5/1/2015- Pool Requirements

#1. Pay A Base Hourly Rate of $18.50

#2. Offer a Specialty Training Program that Exceeds the DOH Requirement

#3. Have a Written, Implemented and Currently Active Quality Assurance Program

#4. Provide Comprehensive Health Coverage which Must Equal or Exceed the DOH Sample Qualified Incentive Pool Provider Benefit
Plan Attestation #1: Pay a Base Hourly Rate

• Pay a base contracted amount, defined as $18.50 per hour, that reflects the cost of investments for home and personal care aide services.

• Those QI/VAPP eligible hours cannot be counted prior to April 1, 2014.

• If rates were subsequently increased after April 1\textsuperscript{st} but before September 1\textsuperscript{st}, only hours paid at the qualifying level are eligible to determine QI/VAPP payment.
Plan Attestation #2: Offer a Specialty Training Program

- Maintain or participate in a specialty training program for home health aides and personal care aides.
- Training programs must exceed DOH minimum training requirement and/or the in-service requirement which is:
  - **Home Health Aides**
    - Basic: 75 hours
    - In-service: Twelve (12) hours per year.
  - **Personal Care Aides**
    - Basic: 40 Hours
    - In-service: Six (6) hours per year.
Plan Attestation #2 continued:
Offer a Specialty Training Program

• Provide a letter of support for the training program from a labor organization. The Department will consider exceptions if a QIPP can demonstrate a specialty training program, but cannot obtain a letter of support.
Plan Attestation #3: Have a written Quality Assurance Program

• A QIPP must have a written quality assurance program that has been successfully implemented and is currently active
  • Not a new requirement for LHCSAs -Section 766.9(k)
  • Includes internal review of policies and patient records
    • Must include Complaint Resolution Process
  • Written summary of review findings
Plan Attestation #4: Provide Comprehensive Health Coverage

- A QIPP must participate in a health benefit fund for their home health aides and/or personal care aides and/or provide comprehensive health insurance coverage to their employees.

- The DOH Sample Qualified Incentive Pool Provider Health Benefit that must be provided is posted on the Department’s website.
Plan Attestation #4 continued:
Provide Comprehensive Health Coverage

<table>
<thead>
<tr>
<th>Health Benefit Package Should Include:</th>
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</thead>
<tbody>
<tr>
<td>Hospital Care</td>
</tr>
<tr>
<td>Hospice</td>
</tr>
<tr>
<td>Emergency Room Visits</td>
</tr>
<tr>
<td>Behavioral Health Services Inpatient/Outpatient</td>
</tr>
<tr>
<td>Maternity</td>
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<tr>
<td>Medical Services</td>
</tr>
<tr>
<td>Prescriptions</td>
</tr>
<tr>
<td>Vision</td>
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<tr>
<td>Dental</td>
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<tr>
<td>Hearing Aids</td>
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</table>

Plan Documentation

Plan Documentation:

• QI/VAPP Reconciliation spreadsheet
  Eligible Hours for State Fiscal Year 2014-15
  • Actual hours from 4/1/14 - 2/28/15
  • Projected hours from 3/1/15 - 3/31/15

• Attestation
Validation of Attestation

• Plans should maintain a copy of the provider Wage Parity certification whether or not they have received QI/VAPP award
• ALL supporting documentation for the Plan attestation is subject to validation
• Plan submissions that cannot be validated upon review of supporting documentation will be referred to the Department for possible recoupment of QI/VAPP funds, and/or for OMIG referral
QI/VAPP Distribution

• Total Pool value of $70 million
• State share of $35M was released to plans based on information submitted by September 2, 2014.
• Reconciliation of total pool value based on updated information including hours and attestation provided by May 1, 2015.
  • Information must be included for all providers
• The total pool value of $70M will be reallocated based on updated hours received and CMS approval.
## QI/VAPP Distribution Examples

### Example – Pool Allocation to Plans

<table>
<thead>
<tr>
<th>Plan</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Original Application Hours</td>
<td>State Share Distribution</td>
<td>Reconciled Hours</td>
<td>Reconciled Distribution</td>
<td>Final Plan Distribution ( D - B)</td>
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<td>4,400,000</td>
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### Example - Plan Specific Allocation to Providers

<table>
<thead>
<tr>
<th>Plan A</th>
<th>A</th>
<th>B</th>
<th>C</th>
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<td>$2.4M</td>
<td>$1.4M</td>
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<tr>
<td>Provider E</td>
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For more information

Any questions concerning the reconciliation process should be directed to the Office of Health Insurance Programs, New York State Department of Health by e-mail at:

hcworkerparity@health.ny.gov

Information about QI/VAPP is available on the Department’s website:

http://www.health.ny.gov/health_care/medicaid/redesign/mrt_61.htm