NYS DSRIP
Project Approval Oversight Panel (PAOP) Meeting
November 9, 2015
Agenda

• Introduction of Independent Assessor (IA) Teams and Overview of IA Roles/Responsibilities
• Review of DSRIP 5-Year Timeline
• PPS Implementation Progression – Example Project 3.a.i
  • Show anticipated PPS progress at various points relative to DSRIP timeline
  • Illustrate major project implementation milestones
  • Illustrate shift of project from P4R measures and transition to P4P measures
• Introduction to PPS under Panel Review
  • PPS Milestone Achievement through 9/30/15
  • Upcoming Milestones
PCG Independent Assessor (IA) Introduction - Overview of Roles and Responsibilities

NYS DSRIP PAOP

November 2015
Independent Assessor Org Chart

Subcontractors
Verrill Dana  COPA/ACO
DataStat – CAHPS
iPRO  Medical record Reviews
Verisk – Medical Record Abstraction
MedReview – Medical Record Abstraction
CHCS – Learning Symposium

Project Manager
Joe Weber, PMP

Senior Advisors
Sean Huse
Matt Sorrentino

Deputy Project Manager/Learning Symposium Coordinator
Brianna Brennan

Performance Data and System Lead
Ashley Odom
Shilpa Vadodaria
Susan Rueckwald
Chris Maggiore
Brenda McCormick
John Fallon

Non-Claims Based Measures Lead
Aaron Holman
Katy Woodbury
Naomi Sobelson
Sasha Land
Bobby Riso

PPS Performance Facilitators Lead
Mandy Sweeney
Mytri Singh
Nelson Mesa
Dr. Robin Kerner
Jennifer Mane

COPA/ACO Lead
Michael Kelleher

Validation Lead
Ravi Kunnakkat

Regional Team #1  NYC
Sabrina Coleman - Lead
Ben Cormack
Kashmir Singh

Regional Team #2
Ed McGill  Lead
Meghan Connors
Sal Ingalls

Regional Team #3
Megan Rurak, Esq - Lead
Denise White
Independent Assessor Responsibilities

The IA has two distinct functions that are most directly engaged with PPS and support the PPS in achieving DSRIP goals:

- **IA Validation Team** – the Validation Team will be working with the PPS to validate submission of the Domain 1 milestones for both Organizational (Governance, Workforce, Budget, etc.….) and Project Requirements (for all Domain 2, 3, and 4 projects).

- **IA Performance Facilitators** – the Performance Facilitators team is focused on providing real time support and assistance implementing project requirements and organizational milestones AND using dashboards to identify outcome measure issues for each PPS.

Both the Performance Facilitators and the Validation Team will be routinely monitoring the project achievements in the Quarterly Reports for each PPS.
5-year DSRIP Implementation Timeline

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PPS transitioning from Planning to Implementation

DSRIP Implementation Timeline and Key Benchmarks

You are here

Q1|Q2|Q3|Q4  Q1|Q2|Q3|Q4  Q1|Q2|Q3|Q4  Q1|Q2|Q3|Q4

DY0  DY1  DY2  DY3  DY4  DY5

Submission/Approval of Project Plan
- PPS Project Plan Valuation
- PPS first DSRIP Payment
- PPS Submission of Implementation Plan and First Quarterly Report

Domain 3: Clinical Improvement P4P Performance Measures begin

Domain 2: System Transformation P4P Performance Measures begin

Domains 2 & 3 are completely P4P

Domain 4: PPS working in collaboration with community and diverse set of service providers to address statewide public health priorities; system improvements and increased quality of care will positively impact health outcomes of total population.

NEW YORK STATE DEPARTMENT OF HEALTH
PPS Implementation Progression – Example Project 3.a.i Integration of Primary Care and Behavioral Health Services

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PPS Implementation Progression – Project 3.a.i

• As PPS move through DSRIP, PPS focus will shift from Planning and Implementation, to Infrastructure Development and Clinical Improvements, and ultimately on Project Outcomes and Sustainability.

• Using project 3.a.i as an example, the timelines on the following slides demonstrate the anticipated progression of a PPS through the 5 years of DSRIP and show how PPS project implementation mirrors the general DSRIP timeline.

• The example timelines are intended to:
  1) Give an understanding of where PPS are now in the process of implementing their projects, and
  2) Demonstrate where PPS are expected to be and what is expected to be accomplished at various critical points over the next 5 years.
Project 3.a.i Implementation Timeline and Key Benchmarks

**Infrastructure Development/System Design:**
- Performance reporting (MAPP)
- EHR integration/patient tracking
- EHR analysis
- Provider engagement/expansion of PPS BH network
- Provider training
- Co-location logistics

- Integrated care protocols implemented
- Staff and Workflow integration
- Regulatory issues: Waivers, integrated applications

Submission/Approval of Project Plan
Submission and approval of Implementation Plan
Submission of DY1Q1 Report
Project 3.a.i Implementation Timeline and Key Benchmarks

**System/Clinical Improvement:**
- Full co-location
- Focus on outcomes measures
- Rapid cycle CQI
- Outpatient program expansion
- Increased patient engagement
- Attainment of PCMH Level 3/APC Model Standards

**Infrastructure Development/System Design**

<table>
<thead>
<tr>
<th>Quarter</th>
<th>DY0</th>
<th>DY1</th>
<th>DY2</th>
<th>DY3</th>
<th>DY4</th>
<th>DY5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td>Submission/Approval of Project Plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q2</td>
<td>Submission and approval of Implementation Plan</td>
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<td></td>
</tr>
<tr>
<td>Q3</td>
<td>Submission of DY1Q1 Report</td>
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</tr>
<tr>
<td>Q4</td>
<td>Domain 3: Clinical Improvement P4P Performance Measures for 3.a.i</td>
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</tr>
</tbody>
</table>

**Domain 3: Clinical Improvement P4P Performance Measures for 3.a.i**

- • Full co-location
- • Focus on outcomes measures
- • Rapid cycle CQI
- • Outpatient program expansion
- • Increased patient engagement
- • Attainment of PCMH Level 3/APC Model Standards
Project 3.a.i Implementation Timeline and Key Benchmarks

**Project Outcomes/Sustainability:**
- Plans for Sustainability
- Integrated Licensure
- VBP
- MCO contracting
- Workforce

| Domain 3: Continued Clinical Improvement P4P Performance Measures for 3.a.i |
|---|---|---|---|---|
| DY3 | Q1|Q2|Q3|Q4 |
| DY4 | Q1|Q2|Q3|Q4 |
| DY5 | Q1|Q2|Q3|Q4 |

**Domain 3: Continued Clinical Improvement P4P Performance Measures for 3.a.i**

- Domain 3: Continued Clinical Improvement P4P Performance Measures for 3.a.i

**Project Outcomes/Sustainability**

- Plans for Sustainability
- Integrated Licensure
- VBP
- MCO contracting
- Workforce

**Submission/Approval of Project Plan**

- Submission of DY1Q1 Report

**Infrastructure Development/System Design**

- Q1|Q2|Q3|Q4

**System/Clinical Improvement**

- Q1|Q2|Q3|Q4
Introduction of PPS and Review of Progress towards Milestone Achievement

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PPS Milestone Achievement Introduction

- After initial review of DY1Q2 Quarterly Reports, all PPS are generally on track and are progressing as expected.*
- There were two Governance milestones with prescribed due dates due in DY1Q2. Based on progress PPS have attested to in their 10.31.15 DY1Q2 Report Submission, all PPS indicate completion of these milestones and are on track to have successful governance structures in place.
  - Milestone 1: Finalize governance structure and sub-committee structure
  - Milestone 3: Finalize bylaws and policies or Committee Guidelines where applicable
- In addition, several PPS indicated completing additional milestones according to their own self-defined timelines.

*Reflects PPS-reported status in their 10.31.15 DYQ2 Report Submission; the results have not been fully validated by the IA to date.
## PPS Milestone Achievement Summary

<table>
<thead>
<tr>
<th>PPS</th>
<th>Total Milestones Completed in Q1/Q2</th>
<th>Milestone sections</th>
<th>Milestones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albany Medical Center Hospital</td>
<td>3</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5: Finalize community engagement plan, including communications with the public and non-provider organizations</td>
</tr>
<tr>
<td>Alliance for Better Health Care, LLC</td>
<td>3</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td></td>
<td></td>
<td>IT</td>
<td>1: Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).</td>
</tr>
<tr>
<td>Central New York Care Collaborative (CNYCC)</td>
<td>3</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Budget</td>
<td>1: Complete funds flow budget and distribution plan and communicate with network</td>
</tr>
<tr>
<td>Adirondack Health Institute, Inc.</td>
<td>3</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5: Finalize community engagement plan, including communications with the public and non-provider organizations</td>
</tr>
<tr>
<td>Millennium Collaborative Care</td>
<td>2</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td>Sisters of Charity Hospital (aka Community Partners of Western NY)</td>
<td>2</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
</tbody>
</table>

*Blue highlight indicates additional milestone PPS reported completing according to their own self-defined timelines.*
# PPS Milestone Achievement Summary

<table>
<thead>
<tr>
<th>PPS</th>
<th>Total Milestones Completed in Q1/Q2</th>
<th>Milestone sections</th>
<th>Milestones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finger Lakes PPS</td>
<td>2</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td>Refuah Community Health Collaborative PPS</td>
<td>2</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td>Westchester Medical Center PPS</td>
<td>2</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td>Care Compass Network PPS</td>
<td>5</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project 2.a.i</td>
<td>2: Utilize partnering HH and ACO population health management systems and capabilities to implement the strategy towards evolving into an IDS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project 2.d.i</td>
<td>12: Develop a process for Medicaid recipients and project participants to report complaints and receive customer service</td>
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<td></td>
<td>13: Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®</td>
</tr>
<tr>
<td>Samaritan Medical Center</td>
<td>2</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
</tr>
<tr>
<td>Bassett Medical Center</td>
<td>3</td>
<td>Governance</td>
<td>1: Finalize governance structure and sub-committee structure</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>3: Finalize bylaws and policies or Committee Guidelines where applicable</td>
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<td></td>
<td>Budget</td>
<td>1: Complete funds flow budget and distribution plan and communicate with network</td>
</tr>
</tbody>
</table>

*Blue highlight indicates additional milestone PPS reported completing according to their own self-defined timelines.*
# Upcoming Milestones

Milestones with impending due dates that PPS are working towards

<table>
<thead>
<tr>
<th>Organizational Section</th>
<th>Process Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Financial Sustainability</strong></td>
<td>Finalize PPS Finance Structure, including reporting structure</td>
</tr>
<tr>
<td></td>
<td>Perform network financial health current state assessment and develop financial sustainability strategy to address key issues</td>
</tr>
<tr>
<td></td>
<td>Finalize Compliance Plan consistent with New York State Social Services Law 363-d</td>
</tr>
<tr>
<td></td>
<td>Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider types and functions, and MCO strategy</td>
</tr>
<tr>
<td><strong>Governance</strong></td>
<td>Establish a clinical governance structure, including clinical quality committees for each DSRIP project</td>
</tr>
<tr>
<td></td>
<td>Establish governance structure reporting and monitoring processes</td>
</tr>
<tr>
<td><strong>Cultural Competency and Health Literacy</strong></td>
<td>Finalize Cultural Competency / Health Literacy Strategy</td>
</tr>
<tr>
<td><strong>Workforce</strong></td>
<td>Workforce Strategy Budget Updates: based on the Workforce Strategy Budget commitment made in the Project Plan Application</td>
</tr>
<tr>
<td></td>
<td>Workforce Impact Analysis and Updates: provides details on the workforce impact and placement impact for redeployed, retrained and newly hired staff</td>
</tr>
<tr>
<td></td>
<td>New Hire Employment Analysis and Updates: provides details on the numbers and types of new hires</td>
</tr>
</tbody>
</table>