



**FAQ - High Performance Fund Webinar  
9/25/2015**

**1. Question:** Is the 30% valuation cap based on per project valuation or total valuation?

**Answer:** It is based on the sum of project valuation for the projects applicable to measures for which the PPS has earned high performance for the high performance-eligible measures.

**2. Question:** Will this webinar cover the Equity program payments or CRFP?

**Answer 1:** No, this webinar only covers the DSRIP High Performance Fund. DOH is currently defining payment mechanisms for the state equity performance, state equity guaranteed, and additional high performance funding. Information regarding these funding sources will be provided in additional webinars and guidance.

**Answer 2:** No, CRFP is an ongoing procurement process and is in progress through the New York State Department of Health, Center for Health Care Facility Planning, Licensure and Finance, Bureau of Health Care Facility Finances. Additional information may be found on the website: <http://www.health.ny.gov/funding/rfa/1504100252/index.htm>

**3. Question:** What are the policies on 30% cap on net project valuation, equity guarantee and the equity performance fund?

**Answer 1:** The DSRIP STCs (Attachment I) state that:

Performing Provider Systems who have achieved performance improvement beyond the stated target improvement value in their approved DSRIP project plan will be eligible for additional payment from the DSRIP high performance fund, not to exceed 30% of their DSRIP project value. No additional policies regarding the 30% project value are developed at this time.

**Answer 2:** No, this webinar only covers the DSRIP High Performance Fund. DOH is currently defining payment mechanisms for the state equity performance, state equity guaranteed, and additional high performance funding. Information regarding these funding sources will be provided in additional webinars and guidance.

**4. Question:** Will the state consider allowing a PPS to be eligible for HPF measures outside of PPS projects if the PPS can demonstrate relevance to the population?

**Answer:** This is not considered within the constraints of the STCs and the attachments. Therefore, the department could not award high performance funding for earning high performance outside of the projects chosen by the PPS.

**5. Question:** Can you walk through one of the examples in the HPF Excel model?

**Answer:** Please see HPF webinar which includes a walkthrough of the HPF Excel model example. Please refer to the Excel model found on the NYS DOH DSRIP Webinars and Presentations website for the High Performance Fund Excel model.

**6. Question:** If the 30% cap was set across the 5 years instead of annually, wouldn't this prevent high performance funds from being returned to CMS?

**Answer:** DOH and the Independent Assessor have considered multiple options for application of the 30% valuation cap. If the 5 year aggregate cap is used (the 30% cap would be based on the total 5-year valuation amount), the PPS could potentially realize all the high performance fund achievement in earnings in one period and not be able to receive any further high performance funding in future years. In the annual approach, a PPS can earn up to 30% of annual project valuation each year, ensuring that some HPF is available to each PPS annually. The methodology will be finalized at a later date with the intent to distribute as much of the funding as possible for consistent high performance over the five year DSRIP period.

**7. Question:** The PPS award letter 3% HPF dollar withhold gets pulled into the HPF pool. If only a few PPS meet high performance goals in DY2, is it possible for the potential dollar amount to PPS to be higher than 3%?

**Answer:** Yes, it is possible for a PPS to earn more than the 3% that has been attributed in the PPS award letters. The total HPF funding pool was established as 3% of total valuation for each PPS, however, funding from the aggregate HPF is distributed according to the methodologies described in the webinar (including but not limited to HPF tier, annual funding proportion, attribution tied to measure achievement, and valuation cap restrictions).