



**Department
of Health**

New York DSRIP

1115 Quarterly Report

July 1, 2015 – September 30, 2015
Year 1, Second Quarter

**November
2015**

www.health.ny.gov/dsrip

**Office of Health
Insurance Programs**

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New York DSRIP Section 1115 Quarterly Report Year 1, 2nd Quarter

Introduction

On April 14, 2014 Governor Andrew M. Cuomo announced that New York finalized Special Terms and Conditions (STCs) with the federal government for a groundbreaking waiver to allow the New York State Department of Health (DOH) to reinvest \$8 billion in federal savings generated by Medicaid Redesign Team (MRT) reforms. The STCs serve as the governing agreement between DOH and the Centers for Medicare and Medicaid Services (CMS) under the 1115 Waiver, also known as the Partnership Plan. The STCs outline the implementation of MRT Waiver Amendment programs, authorized funding sources and uses, and other requirements.

The waiver amendment programs address critical issues throughout the state and allow for comprehensive reform through a Delivery System Reform Incentive Payment (DSRIP) program. The DSRIP program promotes community-level collaborations and focuses on system reform, specifically a goal to achieve a 25 percent reduction in avoidable hospital use over five years. Safety net providers are required to collaborate to implement innovative projects focusing on system transformation, clinical improvement and population health improvement. All DSRIP payments are based on performance linked to achievement of project milestones.

In addition, the STCs commit DOH to comprehensive payment reform and continue New York's efforts to effectively manage its Medicaid program within the confines of the Medicaid Global Spending Cap.

Year 1 Focus

This report summarizes the activities from July 1, 2015 through September 30, 2015, the second quarter of Year 1. This quarterly report includes details pertaining to the second quarter of DSRIP implementation activities including stakeholder education and engagement, planning and implementation activities, and development of key DSRIP policies and procedures. A comprehensive DSRIP website was launched on April 14, 2014 and is available at: www.health.ny.gov/dsrp.

Summary of Key Accomplishments for the Quarter

Highlights of this quarter, which are further described in the report, include:

- Performing Provider Systems (PPS) submitted their DY1 First Quarterly Reports/Domain 1 & Project Implementation Plan inclusive of revised Domain 1 Implementation Plan and Project Implementation Plans.
- The DSRIP Independent Assessor (IA), the DOH Office of Health Insurance Programs (OHIP), and DOH partner agencies including the NYS Office of Mental Health (OMH), NYS Office of Alcoholism and Substance Abuse Services (OASAS), and the NYS Office for People with Developmental Disabilities (OPWDD) reviewed the First Quarterly Reports/Domain 1 & Project Implementation Plans, compiled recommendations and submitted feedback to PPS.
- The Value Based Payment (VBP) Workgroup, consisting of key stakeholders from various constituencies around the state, convened to finalize the Roadmap to Value Based Payment in accordance with CMS feedback. The State received CMS approval of the VBP Roadmap on July 22, 2015.
- DOH hosted the First Annual Statewide PPS Learning Symposium September 17-18, 2015 in Westchester NY.
- DOH and its vendors hosted extensive stakeholder engagement activities and public events.

Stakeholder Engagement Activities, Transparency, and Public Forums

The period covering July 1, 2015 through September 30, 2015 included extensive stakeholder engagement activities detailed below:

- **July 1, 2015:** PPS receive feedback from IA on Domain 1 Implementation Plans
- **July 1, 2015:** Data collection for D2 & D3 non-claims measures webinar
- **July 2, 2015:** The Department of Health, the Office of Mental Health, the Office of Alcoholism and Substance Abuse Services and the Office for People with Developmental Disabilities issued guidance to Performing Provider Systems (PPSs) interested in seeking Additional Regulatory Waivers.
- **July 7, 2015:** Data Security and Information Webinar was released.
- **July 9, 2015:** Salient Interactive Miner (SIM) New Analyst Training
- **July 10, 2015:** Domain 2 & 3 non-claims based measures live webinar with Q&A
- **July 15, 2015:** Domain 2-4 Achievement Values webinar released.
- **July 17, 2015:** All PPS – Operator assisted call.
- **July 22, 2015:** PPS Partner Networks posted to website.
- **July 22, 2015:** CMS approved the Value Based Payment (VBP) Roadmap.
- **August 7, 2015:** PPS DY1 First Quarterly Report (4/1/15 - 6/30/15) / Domain 1 (revised) & Project Implementation Plans due from PPS.
- **August 14, 2015:** Systems Security Plan (SSP) Workbooks email to PPS.
- **August 21, 2015:** Forestland: Earning Payments Webinar and 5 year Payment model (excel document).
- **September 4, 2015:** Partner Contracting Process & Funds Flow Overview by FLPPS webinar was released.
- **September 8, 2015:** PPS receive feedback from IA on PPS DY1 First Quarterly Report / Domain 1 and Project Implementation Plans; 15-day Remediation window begins.
- **September 10, 2015:** Medical Records Review Process Overview Webinar released.
- **September 15, 2015:** Additional Regulatory Waiver Requests due from PPS.
- **September 17 – 18, 2015:** First Annual PPS Learning Symposium.
- **September 22, 2015:** Revised PPS DY1 First Quarterly Report / Domain 1 & Project Implementation Plans due from PPS; 15-day Remediation window closes.
- **September 25, 2015:** High Performance Fund Distribution Methodology Live webinar with Q&A.
- **September 25, 2015:** Workforce Reporting Requirements Live webinar with Q&A.
- **September 28, 2015:** NYS's Medicaid Director, Jason Helgeson, hosted a White Board Video Series "A DSRIP Update" and discussed key DSRIP updates highlighting the Performing Provider Systems (PPS) shift from planning to implementation, Value Based Payment pilot opportunities, PPS network additions and the DSRIP midpoint assessment.
- **September 30, 2015:** Revised Speed and Scale and Reopening of the Performance Network webinar was released.

For more information visit http://www.health.ny.gov/health_care/medicaid/redesign/dsrip/

DSRIP Program Implementation Accomplishments

DSRIP DY1 First Quarterly Reports/Domain 1 & Project Implementation Plan Submission and Review

The 25 PPS submitted their DY1 First Quarterly Reports/Domain 1 & Project Implementation Plan on August 7, 2015 through the MAPP portal. The initial Domain 1 & Project Implementation Plans submitted by each PPS outline their steps towards the specific DSRIP requirements and projects. The documents also represent the first PPS quarterly report in which the PPS documented progress on their implementation efforts through June 30, 2015. The PPS will be required to provide updates on their progress towards achieving Domain 1 milestones in subsequent Quarterly Reports. PPS will also have

the ability to expand upon their initial plans in subsequent Quarterly Reports as their projects evolve through implementation efforts.

DSRIP Requests for New York Regulatory Waivers – Round 1 recap & Round 2

New York State Public Health Law (PHL) § 2807(20)(e) and (21)(e) authorize the waiver of regulatory requirements for DSRIP projects and capital projects that are associated with DSRIP projects by the following agencies:

- Department of Health (DOH),
- Office of Mental Health (OMH),
- Office of Alcoholism and Substance Abuse Services (OASAS), and
- Office for People With Developmental Disabilities (OPWDD)

Each of the agencies listed above will be engaged in the regulatory waiver process as needed based on the specific waivers requested.

Following the March 13, 2015 review of requests for regulatory waivers, a total of 101 were approved; conditional on the receipt of additional information or the completion of further applications.

The primary source of conditional approval was for the request to waive regulations under Mental Hygiene Law (MHL) Articles 28 (DOH), 31 and 32 (OMH & OASAS), in order to allow the co-location and integration of primary care, mental health, and behavioral health services. To facilitate this request, DOH, OMH and OASAS have determined that the requests will be processed through the Licensure Threshold Model (LTM). OPWDD regulations do not prevent Developmentally Disabled Medicaid members from receiving services at these locations. Some OPWDD providers are already co-located with primary/behavioral health providers. Based on the nature of the regulatory waiver requests, OPWDD did not engage in this round of regulatory waivers.

DOH, OMH and OASAS have established parameters for the LTM and certification of providers offering services under DSRIP Project 3.a.i Licensure Threshold. In May of 2015, PPS leads were notified of the availability of the application documents and instructions, which can be found at:

https://www.health.ny.gov/health_care/medicaid/redesign/dsrrip/regulatory_waivers/draft_appl_instructions.htm

Opening a round two, PPS leads were invited to submit additional Regulatory Waiver requests to DOH by September 15, 2015. Applications were distributed for DOH program, OMH, OASAS, and OPWDD review, and responses to these waiver requests are anticipated to go out next quarter.

Roadmap to Value Based Payments (VBP)

A key requirement in the STCs governing DSRIP is the development of the state's Roadmap to VBP. In support of the state's efforts, over 25 stakeholder interviews were conducted to share preliminary VBP concepts considered by DOH, to discuss key elements of developing a VBP model, and to request feedback and suggestions for DOH consideration.

Stakeholders engaged during the interview process included New York State managed care organizations, representative organizations including the health plan associations, hospital associations, legal firms specializing in health care contracting, other state agencies, and community based providers, patient advocates, PPS and other industry experts in VBP. Key themes and challenges identified during this stakeholder engagement process were documented and reviewed throughout the development process of the VBP Roadmap.

During this quarter DOH continued to convene the VBP Workgroup, a formal group of stakeholders and expansion of the Medicaid Reform Team's Global Cap Work Group. The meetings permitted interactive input into the refinement and finalization of the VBP Roadmap, and the strategic vision for how the state

will effectively transition toward a value based payment model for Medicaid reimbursement. DOH released the VBP Roadmap for public comment on March 2, 2015 for a period of 30 days. DOH submitted several drafts of the VBP Roadmap to CMS with the final draft submitted to CMS for review and approval in April 2015. The State received CMS approval of the VBP Roadmap on July 22, 2105.

DSRIP COPA/ACO Application Process

During July 1, 2015 through September 30, 2015, there were no new ACO or COPA applications filed by DSRIP participating PPS. The state, with technical support from the IA, continued efforts towards making final determinations on the existing COPA applications by the end of the DSRIP Year 1, Third Quarter. These efforts included a presentation on market assessment to the New York Attorney General's Office, the submission of letters to the COPA applicants regarding requests for additional information or clarification in support of their application, and the creation of a white paper on requirements for state action immunity from federal and state antitrust laws.

COPA and ACO certificates of authority may or may not be appropriate, or granted in all cases. If granted, they are subject to ongoing monitoring. PPS were encouraged to explore all options and contingencies when designing their DSRIP projects.

Summaries of COPA applications received to date are available at https://www.health.ny.gov/health_care/medicaid/redesign/copa/docs/copa_application_summaries.pdf, and information regarding ACO certificates of authority is available at http://www.health.ny.gov/health_care/medicaid/redesign/aco.

Quarterly Expenditures

Performance Payments

Two DSRIP Performance Fund payments, totaling \$96,770,658 (all funds) were made during the period July 1, 2015 through September 30, 2015. Payments were made on August 24, 2015 to the State University of New York at Stony Brook University Hospital PPS and the Central New York Care Collaborative, Inc. PPS. Please see attachment A for all DSRIP Performance Fund payments made during this quarter and to-date.

Other New York State DSRIP Program Activity

DSRIP Project Management

DSRIP project management efforts were implemented throughout this quarter with the continued use of the successful MRT process and work plan format, with key DSRIP staff meeting twice weekly and reporting on DSRIP progress to New York's Medicaid Director. DSRIP project management meetings include staff from the IA and the DSRIP Support Team (DST) as well as IT vendors tasked with developing technology tools in support of DSRIP. Meetings will continue through DSRIP Years 1 – 5.

DOH has established additional, separate project management meetings with the IA and the DST and a joint meeting involving key staff from DOH, the IA, and the DST. These meetings allow for more in depth reviews of project deliverables with each vendor and to address any policy considerations requiring New York DOH input.

Additional DSRIP Support

DOH continues to support the DSRIP program and the 25 PPS through a wide range of activities and resources. During July 1, 2015 through September 30, 2015, DOH, with assistance from its vendors, conducted the activities and provided the resources described below.

PPS Data and Performance Management

The IA supported DOH in defining DSRIP data and performance management policy and activities included the following:

- Created explanatory materials for project valuation and payment materials to address PPS questions and feedback, including:
 - Webinars describing the process of earning Achievement Values (AVs) and payments;
 - Examples of AV and payment calculations for a sample PPS called Forestland;
 - Webinars and examples describing the process of earning high performance payments; and
 - Data-set creation of all DSRIP measures defined in Attachment J and measure specification guide to track state performance targets, measure sources, and other measure characteristics.
- Assisted DOH in developing guidance for Pay for Reporting (P4R) payments in later DSRIP years and released to PPS data tables demonstrating distribution of P4R and Pay for Performance (P4P) AVs across DSRIP years.
- Supported software development life cycle for MAPP Quarterly Reporting, workforce reporting specifications, ongoing budget and flow of funds reporting, primary care dashboard specifications, documentation audit, user roles, and additional MAPP Quarterly Reporting tool functionality and updates.
- Created end user training and documentation for MAPP quarterly reporting tool updates.
- Supported revisions and development of guidance for Measure and Specification Reporting Manual

Several key decisions were made by DOH including the following:

- High Performance dollars for Tier 1 and Tier 2 will be allocated based on PPS Attribution for Performance (A4P) and the number of projects applicable to high performance chosen by each PPS.
- High Performance dollars will be distributed across DY2 through DY5 according to a defined allocation percentage based on the 5-years allocation in the STCs adjusted to the 4-year high performance period.
- To resolve the issue that no measures were available to form the AV basis for P4R payments in later DSRIP years, DOH established that some measures would be applicable to both P4R and P4P during applicable payment periods.
- Because suitable P4P measures are not available in the 3.g sub-domain until year 4, P4P payment allocation will be shifted to P4R for the applicable payment periods.
- Because Domain 1 measures are reported on a quarterly basis but payments are made on a semi-annual basis, achievement of milestones and targets will be consolidated from quarterly reports to semi-annual AVs.

PPS DY1 First Quarterly Reports/Domain 1 & Project Implementation Plan Review

Upon receipt of the 25 PPS DY1 First Quarterly Reports/Domain 1 & Project Implementation Plan in August, the IA conducted an initial completeness review to ensure all of the required information was included in the plans. The initial Domain 1 & Project Implementation Plans submitted by each PPS outline their steps towards the specific DSRIP requirements and projects. The documents also represent the first PPS quarterly report in which the PPS documented progress on their implementation efforts. Following the completeness review, the plans were divided amongst a team of IA reviewers who were responsible for conducting more in-depth reviews and providing feedback on the plans. Additionally, the plans were reviewed by the DOH OHIP and our state agency partners including OMH, OPH, OASAS and OPWDD, and their comments were incorporated in the feedback presented to the PPS by the IA. The reviews began August 8, 2015 and feedback was provided to the PPS on September 8, 2015.

These reports will serve as the basis for authorizing and calculating the incentive payments to PPS for achievement of DSRIP milestones based upon approved DSRIP project plans. The PPS shall have available for review by New York or CMS, upon request, all supporting data and back-up documentation. These reports will serve as the basis for authorizing incentive payments to PPS for achievement of DSRIP milestones. It is anticipated that the final PPS DY1 First Quarterly Reports/Domain 1 & Project Implementation Plan will be posted to the DSRIP website October 13, 2015.

Validation Protocols

In anticipation of the transition from the planning phase to the implementation phase, the “DSRIP Reporting and Validation Protocols: Domain 1 Milestones, Minimum Standards for PPS Supporting Documentation and Independent Assessor Validation Process” were distributed to the PPS on September 15, 2015 for a two week comment period. Following PPS comment, it is anticipated that a redline version will be released and an operator assisted call will be hosted to discuss the received comments. The document is intended to establish minimum standards for PPS milestone completion.

Medicaid Analytics Performance Portal (MAPP)

The Medicaid Analytics Performance Portal (MAPP) is a statewide performance management system that provide tools and technologies for comprehensive performance management and care management capabilities to PPS, NYSDOH and other stakeholders. MAPP has been built off the New York Medicaid data warehouse (MDW) to leverage current system investments in infrastructure, network and its existing data-rich environment. The MAPP vision focuses on the following three components:

Performance management and analytics: During the DY1 2nd quarter, MAPP's performance management functionality teams continue to 1) code and test clinical performance measures, 2) investigate and develop data analytics and data mining capabilities and 3) prepare for accurate/actionable/current data feeds into the Salient Dashboard technology that sits within MAPP. These dashboards were presented and described for CMS in August 2015. The Salient dashboards allow PPS to review their performance measures and drill down to the member level and to various accountability layers such as Managed Care plan enrollment, Primary Care Physician and Health Homes. During this 2nd quarter, security and programming teams met and discussed policies for user provisioning to access and view summary level vs drill-down member levels of performance.

Care management: MAPP also supports the statewide technology needs for the Health Homes program. This program is intended to more effectively manage a member's care with more interoperability care coordination. During the month of August, Health Homes Phase I system testing and user training occurred.

Data integration: Data integration involves implementation of a Master Data Management System to serve as the authoritative, consistent and clean source of master Medicaid data that can be used to efficiently link data from various data sources. The goal is to provide a more comprehensive view of a member or a provider. The priority begins with PPS and Health Homes access to more patient information.

In addition to these focus areas, MAPP continue to offer other statewide capabilities to support the PPS. MAPP's current functionality includes an online PPS Provider Network, an online tool to receive and support PPS quarterly reporting and the ability to calculate complex data sets such as attribution for performance. Currently there are approximately 250 PPS users and 350 users in total that have been provisioned to utilize MAPP.

The following is a list of major activities completed by the MAPP team in Q2:

- Deployment of Multi-factor Authentication (MFA) security capabilities for all MAPP users
- Deployment of Implementation Project Plan (IPP) Version 2.0 to support additional functionality needed for PPS Q2 Submission
- Delivery of updated Speed and Scale counts based on revised Provider categorization logic

- Completion of technical specifications and design for DSRIP performance measure calculations
- Completion of requirements and design of Salient dashboards
- Deployment of DSRIP Digital Library to provide a centralized location for communication sent from DOH to the PPS
- Generation of a PPS Member Roster data file and development of claims extract releases
- Development of the parameters for the Medicaid Member mailing DSRIP and opt out notice

MRT Innovation eXchange (MIX)

The MIX was created to centrally manage the development of an interactive public discussion platform for sharing ideas and insights into the DSRIP program specifically, and Medicaid reform more generally. This has proven to be a valuable resource for engaging a wide variety of stakeholders in the DSRIP program. The MIX platform was launched in October 2014. After launch, activities included promoting the MIX to new users, communicating with existing users, moderating ongoing discussions, and producing weekly newsletters. From July 1, 2015 – September 30, 2015, the MIX launched a series of challenges to further involve participants and obtain feedback on various DSRIP initiatives. Challenge topics included Patient Engagement in DSRIP, Appreciating Social Determinants of Health and Cultural Competency, and Successful DSRIP Implementation in 2020.

Information Technology (IT) strategy

The DST IT Strategy Team held planning sessions for PPS to increase their understanding of their current and future IT system requirements. These on-site workshops involved discussions of current IT architecture, PPS gap assessment, risk matrix, workflow considerations, Regional Health Information Organization (RHIO) analysis, Health Home project assistance, and a mock-up of IT architecture future state. The IT Strategy Team continued to support PPS and CIOs through involvement with the MAPP CIO Steering committee and the related workgroups, and vendor forums through weekly check-ins and monthly formal meetings. From these meetings, the DST produced participant comment sheets, high-level vendor requirements, vendor case demonstration scripts, and aids for engaging key stakeholders throughout the process.

In addition, the IT Target Operating Model (IT TOM) group created blueprints, requirements, scenarios, and use cases for Projects 2.a.i & 3.a.i to help propel a PPS organizational, technical, and functional readiness to meet DSRIP goals. This group facilitated weekly workshops at four pilot PPS locations to help these PPS navigate through technical requirements. These workshops are projected to last until October 31, 2015.

Medicaid Data Support

The DSRIP Support Team (DST) continued to work with Salient to prepare bookmarks/collections in the Subscriber Identity Module (SIM) tool that support PPS in their estimations of target populations at the project level under each domain. PPS also engaged the team to answer data requests that SIM-trained PPS resources (some PPS employees, other PPS consultants/third parties) sent to a DST monitored email address.

Direct PPS support

The DST worked to support each PPS by providing tools, analysis, information sessions and day to day support to assist with the development of PPS DSRIP Implementation Plans. Day to day assistance included answering DSRIP related questions, clarifying DSRIP documentation and requirements, providing subject matter support, notifying PPS of upcoming releases, evaluating each PPS implementation plan approach, providing weekly status reports to DOH on PPS implementation plan progress and ensuring that PPS are appropriately equipped to meet DSRIP deadlines.

In addition, the DST is planning for a 12-month Medicaid Accelerated eXchange (MAX) series, which is a learning system that brings together a large number of teams from PPS to seek improvement and change in a focused topic area. DST deliverables will include topic selection, partnership with at least

one external partner per topic, MAX series program design, three MAX face-to-face clinics per topic, ongoing support to PPS including conference calls, and a summary presentation and publication. It is anticipated that the first MAX series will be held in October 2015 focusing on the high utilizer population and will be attended by 5 PPS.

DSRIP Learning Symposium

As outlined in the DSRIP STCs Attachment I, the state is responsible for hosting DSRIP Learning Collaboratives (Learning Symposium). DOH hosted the First Annual Statewide PPS Learning Symposium September 17-18, 2015 in Westchester NY. The Learning Symposium was attended by over 400 key personnel including representation from the state, CMS, PPS and selected members of the stakeholder community including provider association representation. The focus of the September Learning Symposium was:

- Initiate relationship-building discussions within and across Performing Provider Systems (PPSs), including providers, consumer advocates, and community-based partners
- Spur discussion about promising efforts across the state and nation to transform current care delivery practices
- Share implementation strategies and success factors to achieve DSRIP goals
- Enhance collaboration within each PPS with broad group of partners
- Develop partnerships across PPSs and ways to share emerging best practices and evidence-based approaches
- Learn about strategies to improve care transitions and transform delivery systems
- Further dialogue between PPSs and NYSDOH about how to achieve DSRIP goals

DOH anticipates hosting multiple PPS Learning Symposiums each year including two regional and one annual Learning Symposium throughout New York to encourage the sharing of best practices.

More information on the Learning Symposium including the presentations, event agenda and participation list can be found at the following link:

http://www.health.ny.gov/health_care/medicaid/redesign/dsrrip/pps_workshops/september_17-18_2015/index.htm

Upcoming Activities

DSRIP Year 1 began on April 1, 2015. Future reports will also include updates on additional activities as required by the STCs and related attachments. The following list identifies anticipated activities for the upcoming quarter.

- **October 7:** Final Approval of PPS DY1 First Quarterly Reports / Domain 1 & Project Implementation Plans
- **October 13:** Final PPS DY1 First Quarterly Reports / Domain 1 & Project Implementation Plans posted to DSRIP Website
- **October 22:** Phase I DSRIP Notice and Opt out letters mailed to Medicaid members
- **October 23:** Open PPS Performance Networks in MAPP for edits and additions
- **October 31:** PPS DY1 Second Quarterly Report (7/1/15 - 9/30/15) due from PPS
- **November 9 & 10:** DSRIP Project Approval & Oversight Panel Bi-Annual Meeting (upstate PPS)
- **November 20:** Close PPS Performance Networks in MAPP for edits and additions
- **December 1:** Independent Assessor provides feedback to PPS on PPS DY1 Second Quarterly Reports; 15-day Remediation window begins
- **December 11:** All-PPS meeting
- **December 15:** Revised PPS DY1 Second Quarterly Report due from PPS; 15-day Remediation window closes
- **December 30:** Final Approval of PPS DY1 Second Quarterly Reports
- **January 21 & 22:** DSRIP Project Approval & Oversight Panel Bi-Annual Meeting (downstate PPS)

- **Late January:** Second Performance DSRIP Payment to PPS

Additional information regarding DSRIP Year 1 key dates can be found at: http://www.health.ny.gov/health_care/medicaid/redesign/dsrp/timelines/index.htm

Additional Resources

More information on the New York State DSRIP Program is available at: www.health.ny.gov/dsrp.

Interested parties can sign up to be notified of DSRIP program developments, release of new materials, and opportunities for public comment through the Medicaid Redesign Team listserv. Instructions are available at: http://www.health.ny.gov/health_care/medicaid/redesign/listserv.htm

Attachment A – DSRIP Performance Fund Payments

