



**Department
of Health**

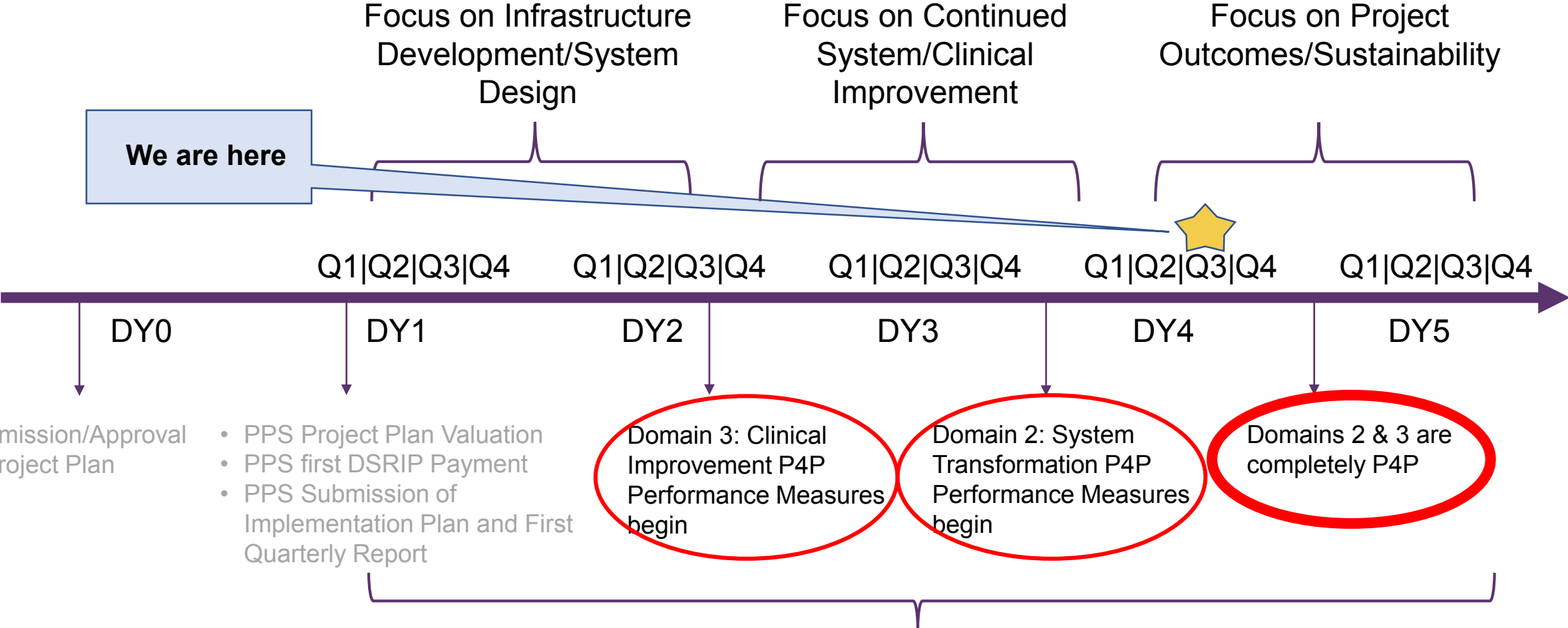
**Medicaid
Redesign Team**

DSRIP Updates

PAOP MEETING

November 29, 2018

DSRIP Implementation Timeline and Key Benchmarks



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.

DSRIP Implementation Update

Progress Highlights, through June 2018 (DY4,Q1)

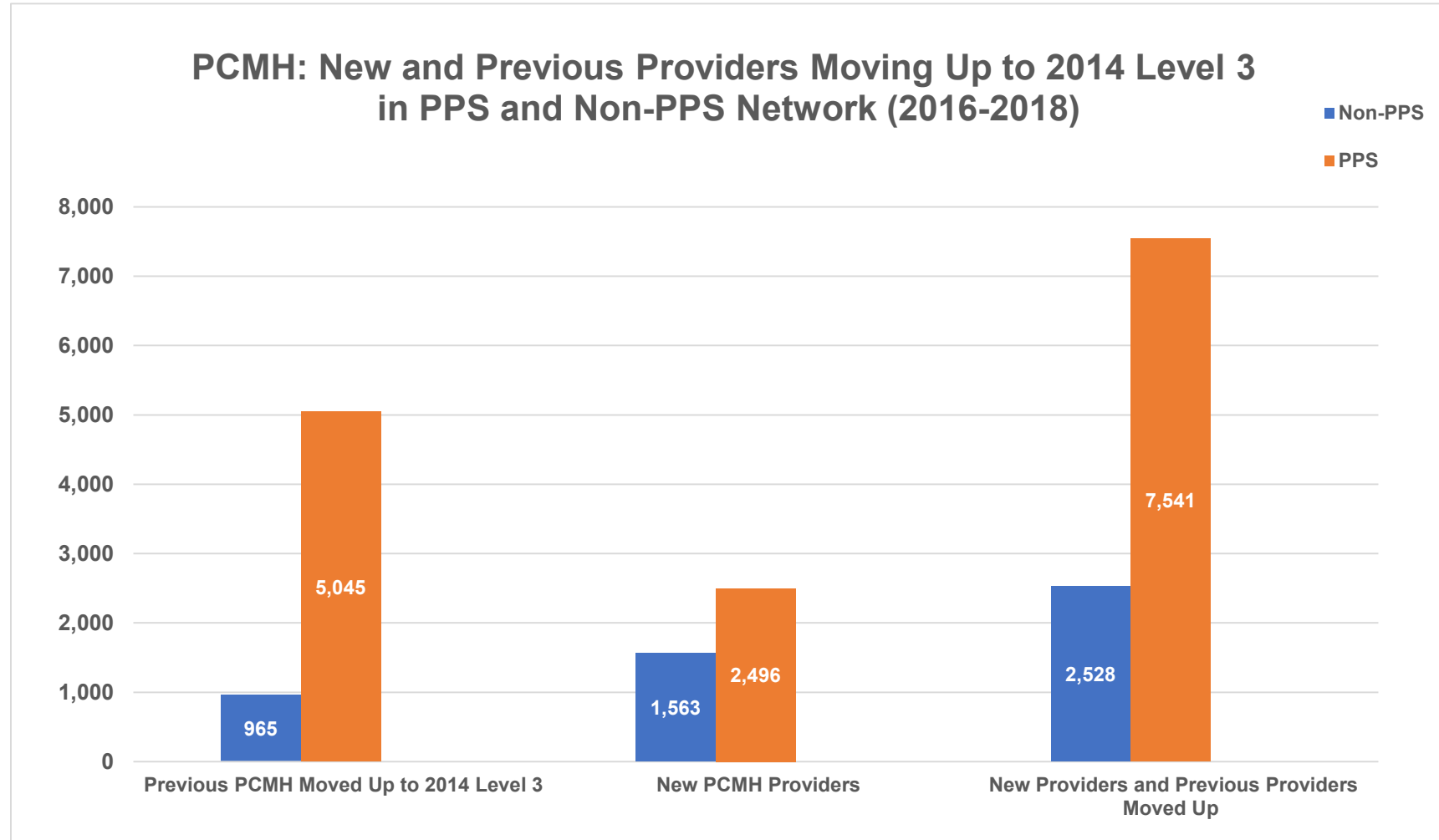
- PPS have successfully completed 90% of all project milestones due
 - 1,807 of 2,018 project milestones scheduled for completion by the end of DY3 (March 2018) have been successfully completed
- 94 projects are complete with 100% of milestones achieved
- ~ 3M patient engagements each DSRIP year
 - 3,058,112 patient engagements in DY2; 2,987,065 patient engagements in DY3
- PPS have earned \$3.9B (86%) of all available funds through DY3 (March 2018).

DSRIP Implementation Update

Progress Highlights, through September 2018 (DY4,Q2)

- PPS significantly increased the number of primary care practices qualifying for NCQA Patient-Centered Medical Home recognition at the highest level 3.
 - Particular increases in primary care providers new to NCQA recognition.
- PPS have exceeded their original partner engagement commitments to 182%.
- PPS have substantially increased their funds flow to partners by over 400% since the Mid Point Assessment.
- DOH working with specific PPS regarding Funds Flow and Performance.

DSRIP Increasing Number of PCMH Providers



PPS Progress on Mid-Point Action Plans – Partner Engagement

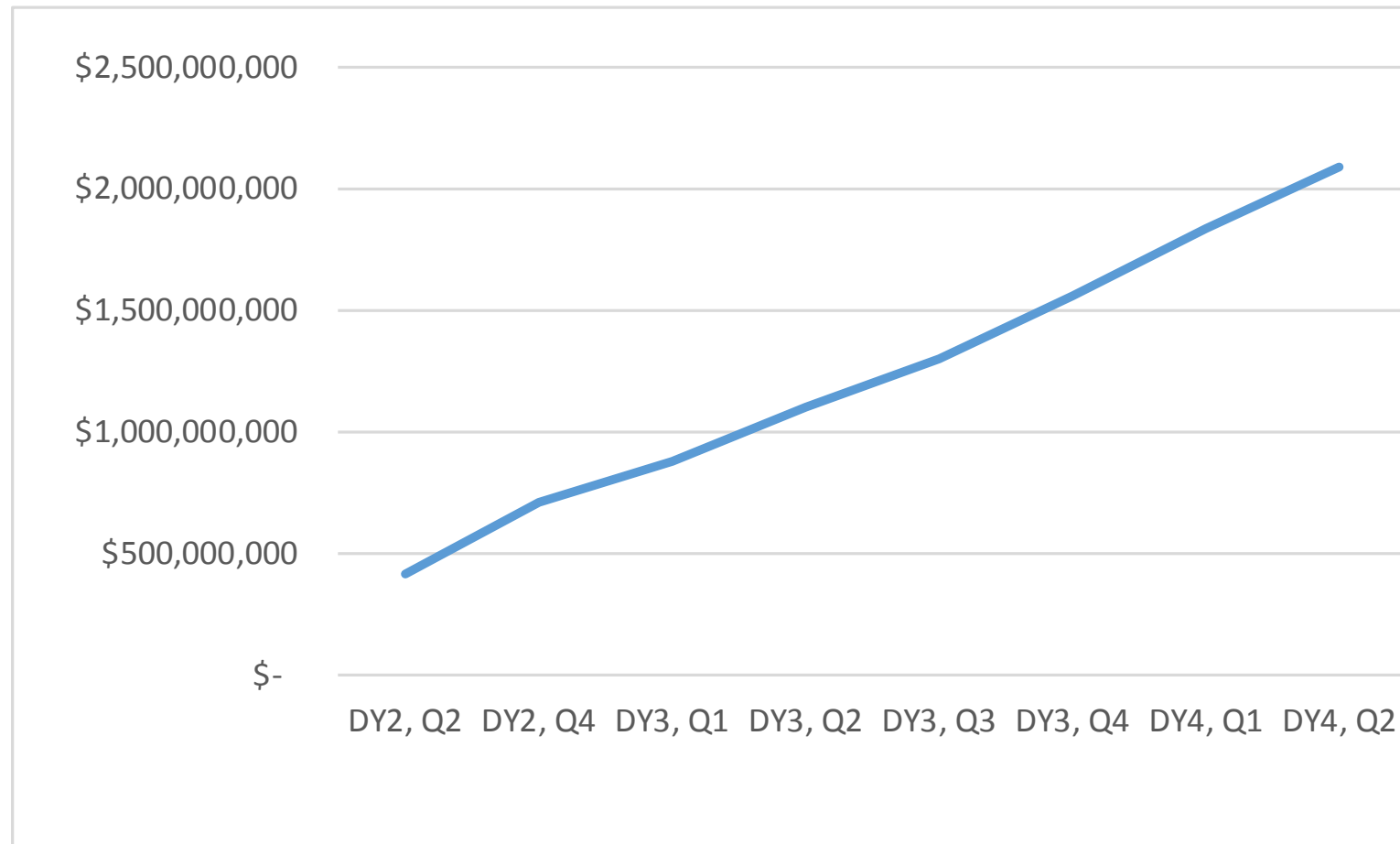
	As of MPA (DY2, Q2)			As of DY4, Q2	
	Committed (in DSRIP project Plan Application)	Partners Engaged	% of Committed Partners Engaged	Partners Engaged	% of Committed Partners Engaged
Practitioner – Primary Care	58,599	44,912	77%	99,353	170%
Practitioner – Non-Primary Care	113,253	111,924	99%	276,127	244%
Hospital	268	788	294%	1,163	434%
Clinic	1,823	2,095	115%	3,424	188%
Case Management / Health Home	1,346	1,402	104%	2,455	182%
Mental Health	10,365	10,841	105%	27,721	267%
Substance Abuse	1,395	1,312	94%	2,179	156%
Nursing Home	887	1,448	163%	1,600	180%
Pharmacy	1,004	452	45%	1,027	102%
Hospice	99	222	224%	281	284%
Community Based Organization	2,876	2,592	90%	3,426	119%
All Other	75,371	88,437	117%	175,811	233%
TOTAL – All Partners	326,927	315,942	97%	594,567	182%

*Note: Count of committed and engaged partners does not reflect an unduplicated count. PPS could commit to and engage the same partner across multiple projects.

PPS Funds Flow

PPS Funds Flow Progress Since Mid-Point

- Since the Mid-Point Assessment, PPS have continued to increase the total distribution of funds.



PPS Funds Flow Progress Since Mid-Point

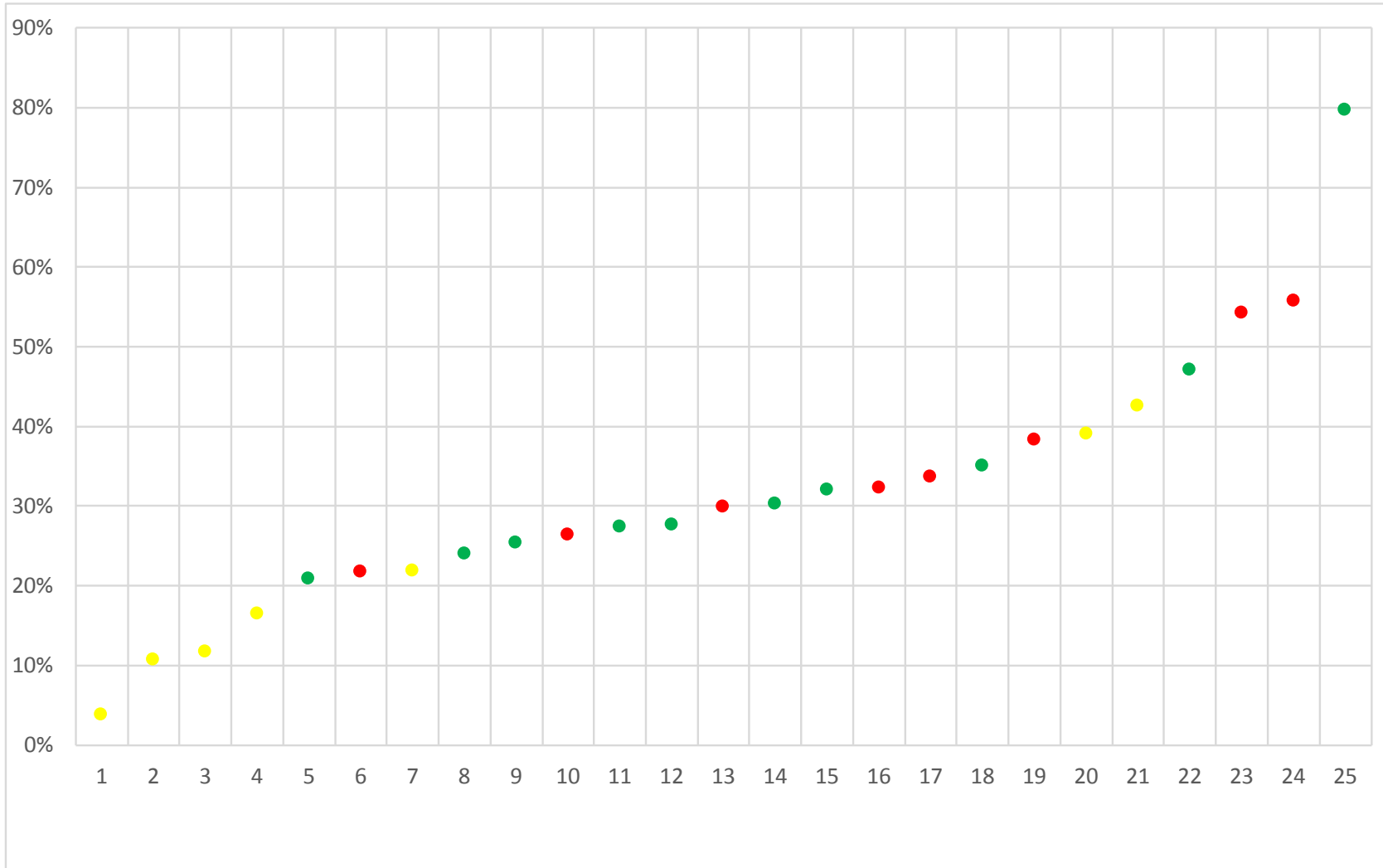
- Through the DY4, Q2 PPS Quarterly Report, PPS have increased the amount of funding distributed to partners relative to the funding distributed at the time of the Mid-Point Assessment.

	Cumulative Funds Flow at MPA (DY2, Q2)	Cumulative Funds Flow at DY4, Q2	Additional Funds Flow since MPA	% Change in Funds Flow
Total Funds Flow	\$414,267,236	\$2,088,694,249	\$1,674,427,013	404%
Funds Flow to Ambulatory and Community Partners (includes Partner Types in following lines)	\$113,408,240	\$1,146,739,424	\$1,033,331,183	911%
<i>Practitioner – Primary Care Provider (PCP)</i>	\$14,659,935	\$138,266,049	\$123,606,114	843%
<i>Clinic and Hospital – Ambulatory</i>	\$29,687,182	\$338,200,905	\$308,513,723	1,039%
<i>Mental Health</i>	\$9,741,485	\$69,559,233	\$59,817,748	614%
<i>Substance Abuse</i>	\$4,319,963	\$26,452,915	\$22,132,952	512%
<i>Community Based Organizations</i>	\$11,993,454	\$68,789,804	\$56,796,350	474%
<i>All Other Partner Types (Practitioner – Non PCP, Case Management, Health Home, Nursing Home, Pharmacy, Hospice, All Other, Home Care, Uncategorized, PPS PMO – Non-Administration)</i>	\$43,006,222	\$505,470,517	\$462,464,296	1,075%
Funds Flow to Hospital – IP/ED*	\$121,775,967	\$596,555,735	\$474,779,768	390%
Funds Flow to PPS PMO – Administration**	\$179,083,029	\$345,399,091	\$166,316,062	93%

* Hospital – IP/ED may include secondary funds flow to CBOs and other community partners due to 95/5 restrictions on distributions to non-safety net partners. We will attempt to break this out more discretely in future reports.

** PPS PMO – Administration amount reflects a projection of the portion of PMO spending to date based on projected distribution percentages from PPS funds flow planning documents.

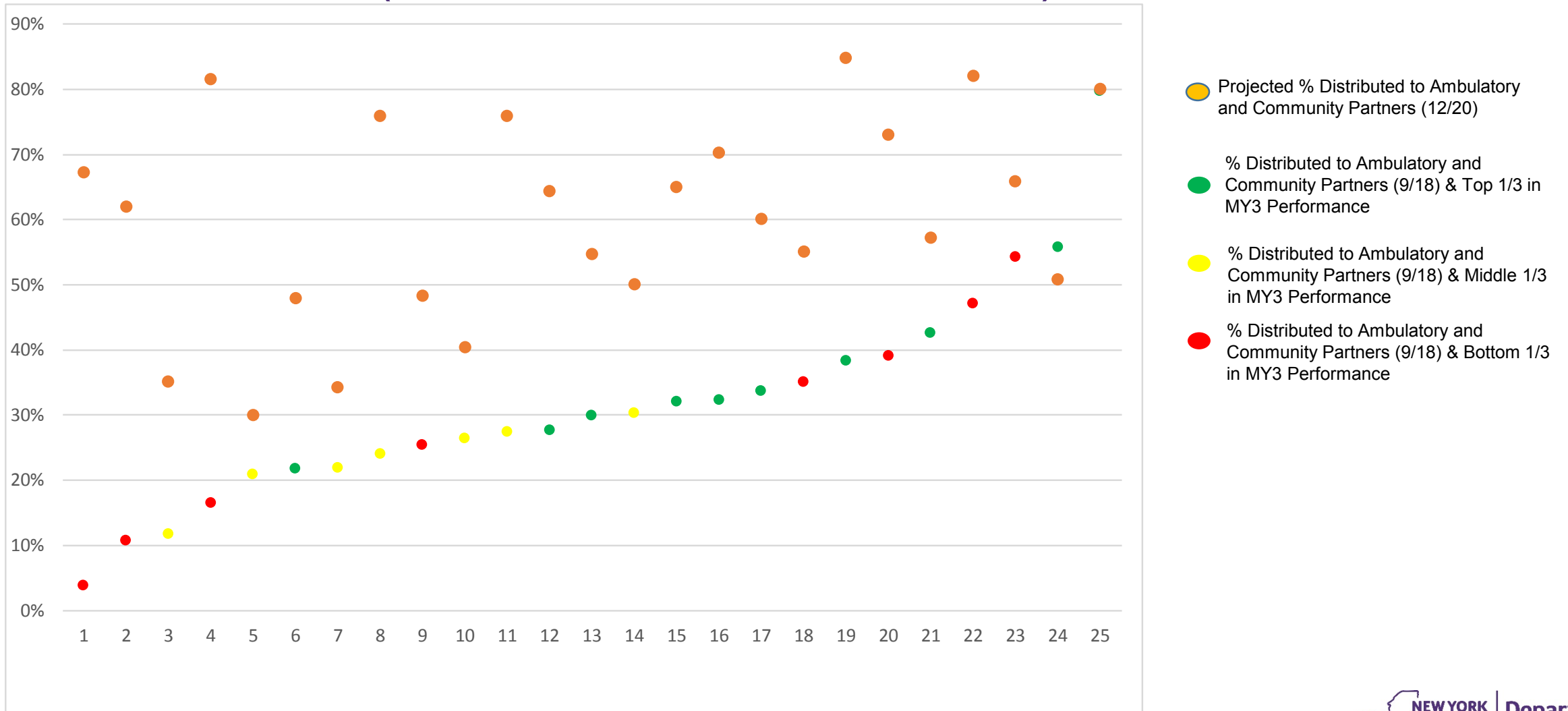
% Funds Distributed to Ambulatory and Community Partners – as of 9/18



- % Distributed to Ambulatory and Community Partners (9/18) & Top 1/3 in MY3 Performance
- % Distributed to Ambulatory and Community Partners (9/18) & Middle 1/3 in MY3 Performance
- % Distributed to Ambulatory and Community Partners (9/18) & Bottom 1/3 in MY3 Performance

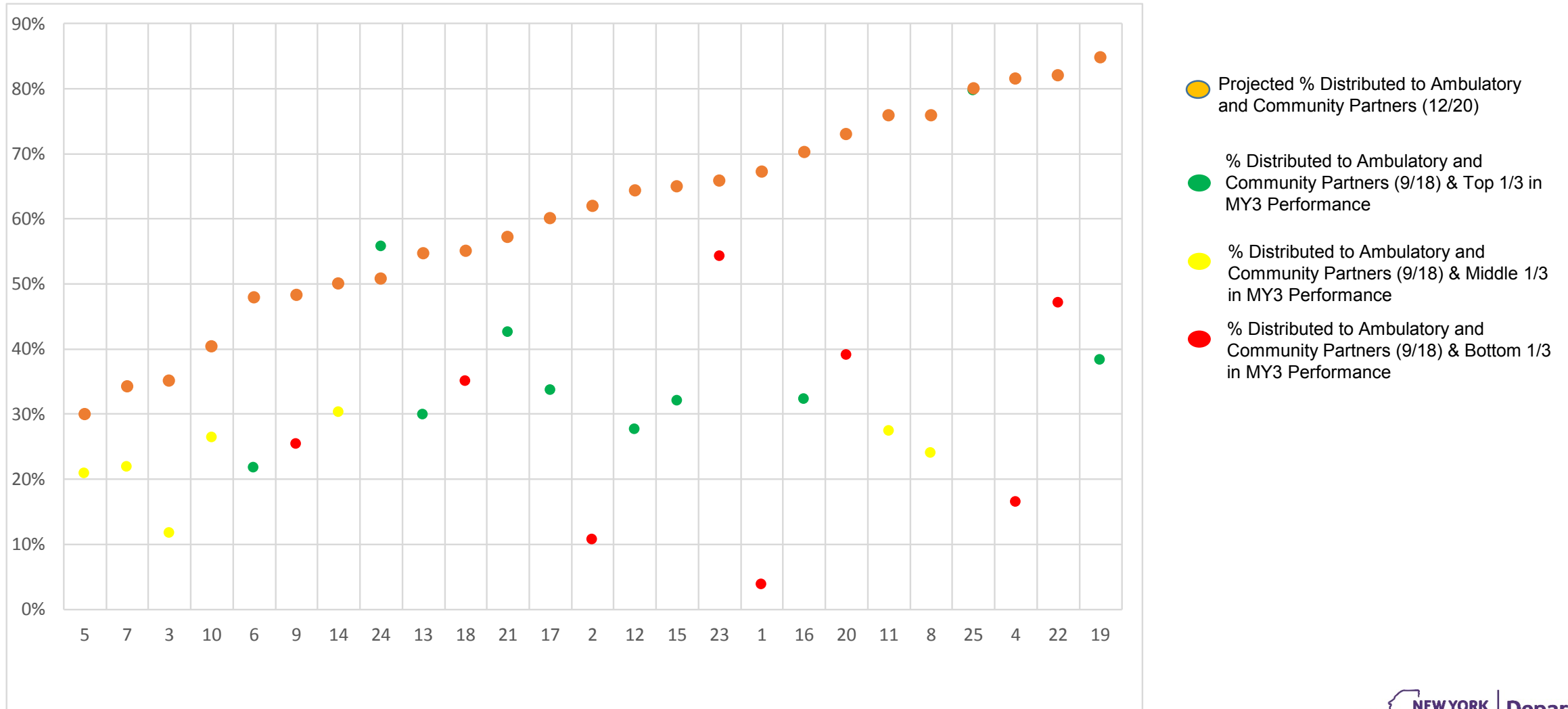
Ambulatory and Community Partners represent all partner types except for the Hospital – IP/ED and PPS PMO Administration categories.

% Funds Distributed to Ambulatory and Community Partners – as of 9/18 and 12/20 (sorted on 9/18 distributions)



Ambulatory and Community Partners represent all partner types except for the Hospital – IP/ED and PPS PMO Administration categories.

% Funds Distributed to Ambulatory and Community Partners – as of 9/18 and 12/20 (sorted on 12/20 projections)



Ambulatory and Community Partners represent all partner types except for the Hospital – IP/ED and PPS PMO Administration categories.