WMCHHealth PPS
Project Advisory Committee

October 15th, 2015
Via Webinar: 10:00–11:00 a.m.
# WMCH Health PPS PAC Webinar Agenda

**October 15, 2015**

<table>
<thead>
<tr>
<th>TOPIC</th>
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</thead>
<tbody>
<tr>
<td>I. Introduction</td>
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</table>
| II. PPS Update | • Final workplan approved  
• First quarterly report to Independent Assessor submitted  
• On-site meeting with Independent Assessor |
| III. Network Update | • MSA Update  
• Schedule B’s |
| IV. Budget and Funds Flow | • DSRIP Budget  
• Provider Funds Flow Framework for Program Implementation |
| V. Clinical Governance | • PPS Governance Structure  
• WMCH Health PPS DSRIP Summit and Quality Meeting |
| VI. Next Steps | |
PPS Update
Network Update
WMC HEALTH PPS NETWORK UPDATE

• Key additions to Network Partners in ALL provider types

• 204 Master Services Agreements (MSA’s) and agreements with network partners received to date

Next Steps

• NYS DOH opens the PPS Networks in October
• Agreements for Projects and related resources “Schedule B”
Budget and Funds Flow
# DSRIP Budget

DSRIP Budget Submitted to DOH and Approved

<table>
<thead>
<tr>
<th>Budget Items</th>
<th>DY1</th>
<th>DY2</th>
<th>DY3</th>
<th>DY4</th>
<th>DY5</th>
<th>TOTAL</th>
<th>5 Year %</th>
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</thead>
<tbody>
<tr>
<td>Waiver Revenue</td>
<td>$41,834,599</td>
<td>$44,581,933</td>
<td>$72,094,581</td>
<td>$63,839,476</td>
<td>$41,834,599</td>
<td>$264,185,188</td>
<td>47.7%</td>
</tr>
<tr>
<td>Cost of Project Implementation</td>
<td>$20,353,727</td>
<td>$27,360,547</td>
<td>$28,863,585</td>
<td>$27,444,339</td>
<td>$22,021,458</td>
<td>$126,043,657</td>
<td>47.7%</td>
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<tr>
<td>Internal PPS Provider Bonus Payments</td>
<td>$0</td>
<td>$3,250,887</td>
<td>$26,006,159</td>
<td>$35,059,257</td>
<td>$32,123,006</td>
<td>$96,439,309</td>
<td>36.5%</td>
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<tr>
<td>Revenue Loss</td>
<td>$4,183,460</td>
<td>$4,458,193</td>
<td>$7,209,458</td>
<td>$6,383,948</td>
<td>$4,183,460</td>
<td>$26,418,519</td>
<td>10.0%</td>
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<tr>
<td>Innovation Pool</td>
<td>$0</td>
<td>$1,000,000</td>
<td>$4,000,000</td>
<td>$4,000,000</td>
<td>$1,000,000</td>
<td>$10,000,000</td>
<td>3.8%</td>
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<tr>
<td>Administration</td>
<td>$836,692</td>
<td>$891,639</td>
<td>$1,441,892</td>
<td>$1,276,790</td>
<td>$836,692</td>
<td>$5,283,704</td>
<td>2.0%</td>
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<tr>
<td><strong>Total Expenditures</strong></td>
<td><strong>$25,373,879</strong></td>
<td><strong>$36,961,267</strong></td>
<td><strong>$67,521,094</strong></td>
<td><strong>$74,164,333</strong></td>
<td><strong>$60,164,616</strong></td>
<td><strong>$264,185,188</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Undistributed Revenue</strong></td>
<td><strong>$16,460,720</strong></td>
<td><strong>$24,081,386</strong></td>
<td><strong>$28,654,874</strong></td>
<td><strong>$18,330,017</strong></td>
<td><strong>$0</strong></td>
<td><strong>$0</strong></td>
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</tbody>
</table>
Patient Centered Medical Home

RHIO Interfaces / Meaningful Use/ Analytics

Care Management

Workforce: Training

Other Implementation Activities

Incentive Payments

Safety Net (95%)

Non-Safety Net (5%)
### DSRIP Funding Overview

#### Uneven Distribution Over 5 Years

- **Year 1**: Process
- **Year 2**: Reporting
- **Year 3**: Performance
- **Year 4**: Process
- **Year 5**: Performance

<table>
<thead>
<tr>
<th>Year</th>
<th>Process</th>
<th>Reporting</th>
<th>Performance</th>
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</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>11%</td>
<td>4%</td>
<td>16%</td>
</tr>
<tr>
<td>Year 2</td>
<td>5%</td>
<td>4%</td>
<td>13%</td>
</tr>
<tr>
<td>Year 3</td>
<td>11%</td>
<td>4%</td>
<td>16%</td>
</tr>
<tr>
<td>Year 4</td>
<td>5%</td>
<td>4%</td>
<td>13%</td>
</tr>
<tr>
<td>Year 5</td>
<td>5%</td>
<td>4%</td>
<td>16%</td>
</tr>
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</table>

*60% of first year money (~9.6% of total) will be available for “start-up” based on submission of accepted application; all other payments will be based on completing milestones or hitting performance targets.

### Milestones & Performance Targets

1. **Organizational Work Stream Milestones**
   - 1. Governance
   - 2. Workforce
   - 3. Cultural Competency
   - 4. Financial Sustainability-Value Based Purchasing

2. **Quarterly Project Milestones**
   - 1. Project Milestones (e.g. “MU”)
   - 2. Activated Patients
   - 3. Network/ Provider Engagement

3. **Population Clinical Performance Measures**
   - 1. Pay for Reporting
   - 2. Pay for Performance
## Quarterly Project Milestones

<table>
<thead>
<tr>
<th>Project</th>
<th>Actively Engaged Patients</th>
<th>Sep-15 9/30/2015</th>
<th>PCPs</th>
<th>Specialists</th>
<th>Hospitals</th>
<th>BH Crisis Providers</th>
<th>Medical Village Providers</th>
<th>Health Homes</th>
<th>CBOs</th>
<th>Mar-16 3/31/2016</th>
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<tr>
<td>2.a.iii Health Home At Risk</td>
<td></td>
<td>500</td>
<td>TRUE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,000</td>
</tr>
<tr>
<td>2.a.iv Medical Village (Orange+Ulster)</td>
<td></td>
<td>600</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,000</td>
</tr>
<tr>
<td>2.b.iv 30 d Readmits [all hospitals]</td>
<td></td>
<td>250</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,000</td>
</tr>
<tr>
<td>3.a.i BH/PC Integration</td>
<td></td>
<td>2,000</td>
<td>TRUE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,000</td>
</tr>
<tr>
<td>3.a.ii BH Crisis Stabilization</td>
<td></td>
<td>150</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>500</td>
</tr>
<tr>
<td>3.c.i Diabetes</td>
<td></td>
<td>500</td>
<td>TRUE</td>
<td>TRUE</td>
<td>TRUE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,250</td>
</tr>
<tr>
<td>3.d.iii Asthma [primary DX only]</td>
<td></td>
<td>500</td>
<td>TRUE</td>
<td>TRUE</td>
<td>TRUE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,200</td>
</tr>
<tr>
<td>2.d.ii Patient Activation</td>
<td></td>
<td>5,000</td>
<td>TRUE</td>
<td>TRUE</td>
<td>TRUE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12,000</td>
</tr>
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* Reflects recent PCG guidance. (For 3ai participating primary care sites must offer on-site BH services.)

REPORTING NOW: April 1, 2015 – Sept 30, 2015
Contact Brian Lorber: [Brian.Lorber@WMCHhealth.org](mailto:Brian.Lorber@WMCHhealth.org) 914-326-1510
# Provider Funds Flow Framework For Program Implementation

<table>
<thead>
<tr>
<th>Category</th>
<th>Purpose of Funding</th>
<th>Budget **</th>
<th>Support For Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Local and Regional Partner Integration Activities</strong></td>
<td>To provide some support for partner resources required to designate a DSRIP contact, respond to required assessments and surveys, participate on committees and in local deployment work groups.</td>
<td>$5 M</td>
<td>Quarterly support for WMCH Health PPS network partners for participation in PPS committee and survey activities.</td>
</tr>
<tr>
<td><strong>PCMH, MU and HIE Support</strong></td>
<td>To provide technical assistance to eligible PCPs to achieve NCQA Level 3 2014 PCMH standards; to PCPs and others to connect to RHIO, exchange clinical information via Direct and achieve MU Stage 2.</td>
<td>$6 M</td>
<td>Technical support for PCPs to meet PCMH requirements; for PCPs and others to connect to RHIO and meet MU2.</td>
</tr>
<tr>
<td><strong>Expanding Care Management</strong></td>
<td>To provide support for hospitals, PCPs and specialists to improve transition services through links to Health Homes and to expand Health Home-like care coordination services to better serve Medicaid customers with chronic conditions including links to community based services to address social determinants of health.</td>
<td>$15 M</td>
<td>Support for care management through Health Homes, through WMCH Health, or direct support to partners. Support proportional to Medicaid population served, community need and WMCH Health PPS attribution.</td>
</tr>
<tr>
<td><strong>Reporting Patient Engagement</strong></td>
<td>To provide some support for clinical partner resources required to report patient engagement and other clinical performance metrics as required for each project.</td>
<td>$5 M</td>
<td>All provider types as specified by each performance measure; Proportional to reporting.</td>
</tr>
<tr>
<td><strong>Population Health Analytics &amp; Other Project Support</strong></td>
<td>To create the analytics platform needed to support population health management and sustained quality improvement including: identification of patient populations at risk who could benefit from targeted interventions, identifications of gaps in care, identification of ineffective or inefficient patterns of care, evaluation interventions, monitoring of compliance with project requirements.</td>
<td>$32 M</td>
<td>Creation of actionable information about patients and populations served by partner organizations to help partners successfully prepare for the transition to value based reimbursement, e.g., support for Medical Village implementation, BH and CBO partners to expand BH Crisis services, Stanford Diabetes Program, telemedicine for expanded asthma services, Public Health campaigns around tobacco cessation and cancer screening.</td>
</tr>
<tr>
<td><strong>Key Project Requirements</strong></td>
<td>To provide technical assistance, staffing or other specific project requirements.</td>
<td>$5 M</td>
<td>Workforce support, 1199 training, Cultural Competency Training, Focus Groups and Summits.</td>
</tr>
<tr>
<td><strong>Total Above</strong></td>
<td></td>
<td>$68 M</td>
<td></td>
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* Considerations: (1) regional needs (2) Safety-Net status (3) attribution (4) proportional to Medicaid patients served and (5) performance.

** Budgeted 5 year Support for Program Implementation; distribution of funds to the PPS is subject to state distribution methodologies.
WMCHealth PPS: Support for Partner’s participation

• Designating a contact person for PPS communication;

• Completing requested baseline assessment surveys for Workforce, IT, PCMH readiness (if applicable), Financial Sustainability, Compliance and Cultural Competency;

• Updating network information: sites of operation, employed and affiliated providers;

• Participating in WMCHealth PPS governance and project implementation including sending a delegate to the annual Summit and Quality meeting and planning related to applicable projects.
Clinical Governance
WMCHealth PPS Governance Overview

Local Hub Governance

Regional Clinical Council (Cross-PPS)

Quality Steering committee

Center for Medicare & Medicaid Services

New York State Department of Health

Westchester Medical Center

Center for Regional Healthcare Innovation (Central Services Org.)

PPS PAC Executive Committee

Nominating Committee

Finance Committee

IT Committee

Workforce Committee

Ad Hoc Sub-Committees

Local Deployment: Medical Neighborhood
Primary Care, Hospitals, Health Homes, Specialty Care links to BH and Community Services

Local Deployment: Community Engagement

Medical Village(s)

Local Deployment: Behavioral Health
WMCHealth PPS: Clinical Governance

WMC PPS EXEC

Quality Steering Committee

Project Advisory Quality Committees
- Asthma
- Behavioral Health (Crisis & Primary Care Integration)
- Diabetes
- Health Home at Risk
- Hospital Transition Care
- Community Engagement
- Medical Village

WMC PPS Advisory Quality Committee

Cross PPS Lead Committee

Hudson Region DSRIP Clinical Council (HRDCC) With PHIP

Hudson Region DSRIP Public Health Council
- Tobacco & Cancer Screening

Hudson Region DSRIP Behavioral Health Council

Local Hub Governance

Medical Villages
Local Deployment: Behavioral Health:
- BH Crisis
- Integrated Delivery System at BH sites: EHR, MU, HIE, Medication Reconciliation
- Medical services at BH sites: Asthma, Cancer Screening, Cardiovascular, Diabetes, Tobacco
- Patient Activations (PAM)
- Links to Health Home, & Primary Care
- Cultural Competency

Local Deployment: PC/HH/Hospital “Medical Neighborhood”
- Integrated Delivery System: PCMH & BH Integration, EHR, MU, HIE, Medication Reconciliation, Referral tracking
- Asthma & Diabetes Management
- Cancer Screening & Tobacco Cessation
- Cultural Competency & Health Literacy
- Care coordination; Hospital Transitions; links to Health Homes
- Patient Activation (PAM & platforms to link to community services and peer support?)

Local Deployment, Community Engagement:
- Patient Engagement @ CBOs (PAM & focus groups)
- Links to Social Services (Housing, Food, etc)
- Cultural Competency & Health Literacy Training
- Public Health Initiatives @ LGUs
- Community voice in DSRIP
WMCHealth PPS DSRIP Summit and Quality Meeting
November 5, 2015

AGENDA SUMMARY

8:15 am: Breakfast Meetings:
  • Asthma, Diabetes, Health Home Expansions, Care Transitions

9:30 am: General Session:
  • Cultural Competency
  • Value Based Payment
  • Community Care North Carolina: Helping Practices Help Patients
  • All Project Status Report

2:35 pm: Workshop: DSRIP in Primary Care
  • Technical Support for: Patient Centered Medical Home, Connecting to HealthLink NY for Health Information Exchange
  • Primary Care & Health Homes: Support for primary care based care management
  • Building the Medical Neighborhood for DSRIP and Beyond

Location: Westchester Marriott, Tarrytown, NY

Every Partner Organization to send a delegate to the Quality Meeting

Full registration link:
Click to Register

Full registration link:
## WMCHealth PPS Contacts

### CRHI Executive Staff

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>June Keenan</td>
<td>SVP, Executive Director</td>
<td>(914) 326-4201</td>
<td><a href="mailto:June.Keenan@wmchealth.org">June.Keenan@wmchealth.org</a></td>
</tr>
<tr>
<td>Janet (Jessie) Sullivan, MD</td>
<td>Vice President, Medical Director</td>
<td>(914) 326-4202</td>
<td><a href="mailto:Janet.Sullivan@wmchealth.org">Janet.Sullivan@wmchealth.org</a></td>
</tr>
<tr>
<td>Peg Moran</td>
<td>Vice President, Operations</td>
<td>(914) 326-4210</td>
<td><a href="mailto:Peg.Moran@wmchealth.org">Peg.Moran@wmchealth.org</a></td>
</tr>
<tr>
<td>Deborah Viola, PhD</td>
<td>Vice President, Community Health and Public Policy</td>
<td>(914) 326-4203</td>
<td><a href="mailto:Deborah.Viola@wmchealth.org">Deborah.Viola@wmchealth.org</a></td>
</tr>
<tr>
<td>Maureen Doran</td>
<td>Vice President, Integrated Care Network</td>
<td>(914) 326-4220</td>
<td><a href="mailto:Maureen.Doran@wmchealth.org">Maureen.Doran@wmchealth.org</a></td>
</tr>
</tbody>
</table>

### CRHI Senior Staff

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helene Kopal</td>
<td>Senior Director of Integrated Delivery Systems</td>
<td>(914) 326-4209</td>
<td><a href="mailto:Helene.Kopal@wmchealth.org">Helene.Kopal@wmchealth.org</a></td>
</tr>
<tr>
<td>Joseph Liberatore</td>
<td>Senior Director, Finance and Administration</td>
<td>(914) 326-4216</td>
<td><a href="mailto:Joseph.Liberatore@wmchealth.org">Joseph.Liberatore@wmchealth.org</a></td>
</tr>
<tr>
<td>Barbara Hill</td>
<td>Director, Community Workforce Transformation</td>
<td>(914) 326-4205</td>
<td><a href="mailto:Barbara.Hill@wmchealth.org">Barbara.Hill@wmchealth.org</a></td>
</tr>
<tr>
<td>Thao Doan</td>
<td>Research Analyst</td>
<td>(914) 326-4207</td>
<td><a href="mailto:Thao.Doan@wmchealth.org">Thao.Doan@wmchealth.org</a></td>
</tr>
<tr>
<td>Nina Lemons</td>
<td>Senior Manager, Patient Engagement</td>
<td>(914)-326-4215</td>
<td><a href="mailto:Nina.Lemons@wmchealth.org">Nina.Lemons@wmchealth.org</a></td>
</tr>
<tr>
<td>Melissa Staats</td>
<td>Senior Manager, Behavioral Health</td>
<td>(914)-326-4214</td>
<td><a href="mailto:Melissa.Staats@wmchealth.org">Melissa.Staats@wmchealth.org</a></td>
</tr>
<tr>
<td>Lauren Klein</td>
<td>Senior Program Manager</td>
<td>(914)-326-4206</td>
<td><a href="mailto:Lauren.Klein@wmchealth.org">Lauren.Klein@wmchealth.org</a></td>
</tr>
<tr>
<td>Brian Lorber</td>
<td>Senior Manager, Informatics/Analytics</td>
<td>(914)326-1510</td>
<td><a href="mailto:Brian.Lorber@wmchealth.org">Brian.Lorber@wmchealth.org</a></td>
</tr>
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</table>

### Primary Contact for PPS Partners by county:

**Dutchess, Putnam, Westchester, Ulster**

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marcie Colon</td>
<td>Program Manager</td>
<td>(914)-326-4213</td>
<td><a href="mailto:Marcie.Colon@wmchealth.org">Marcie.Colon@wmchealth.org</a></td>
</tr>
</tbody>
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**Delaware, Sullivan, Orange, Rockland, Ulster**

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melissa Thomas-Belmar</td>
<td>Physician Liaison</td>
<td>(914)-326-4208</td>
<td><a href="mailto:Melissa.Thomas-Belmar@wmchealth.org">Melissa.Thomas-Belmar@wmchealth.org</a></td>
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