

AMAZING  
THINGS  
ARE  
HAPPENING  
HERE

# New York-Presbyterian/Queens PPS

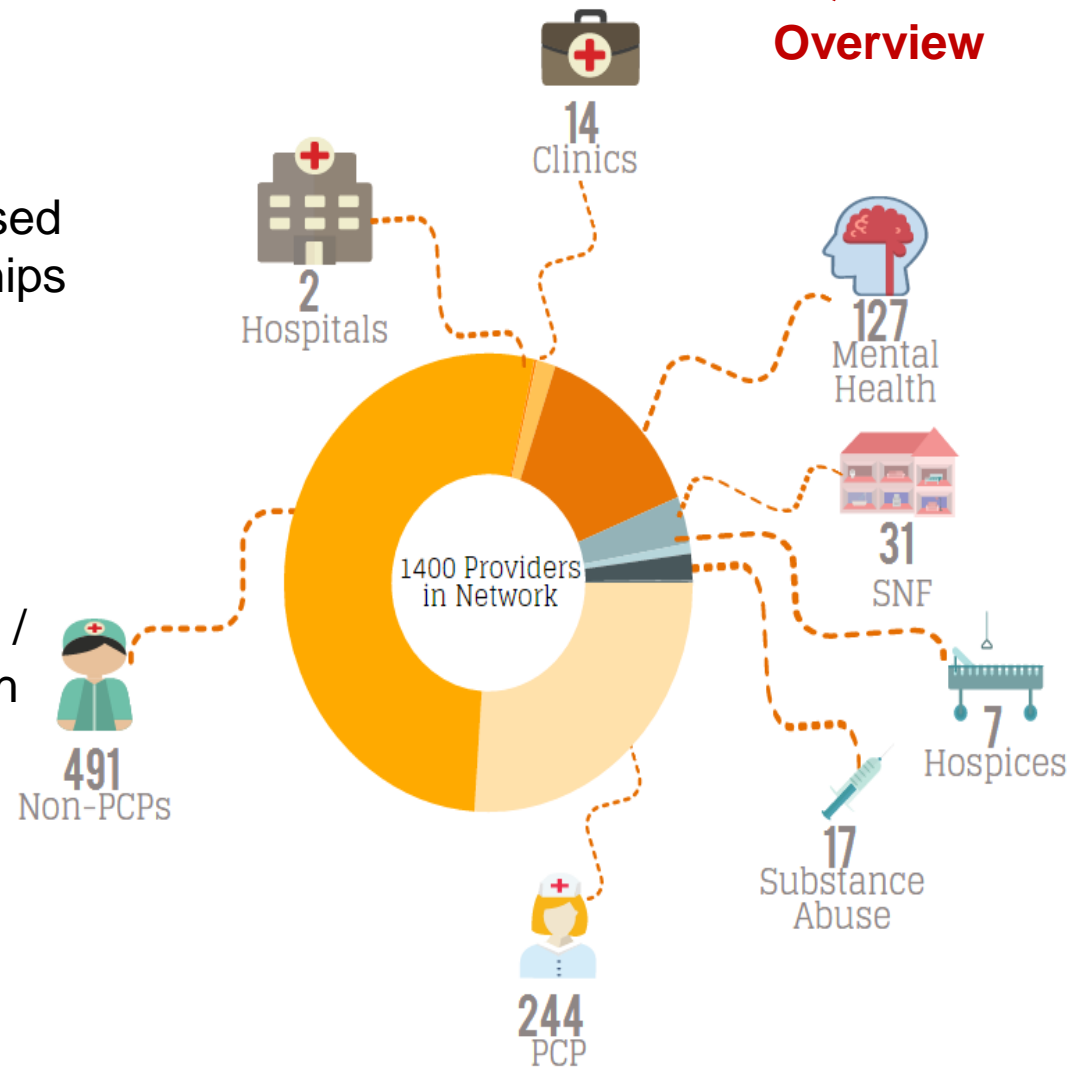
Project Advisory Oversight Panel Presentation

January 22, 2016

 **New York-Presbyterian**  
**Queens**

# NYP/Q PPS Overview

- Smallest PPS in NYS DSRIP
- Network development was focused and based on existing relationships
- Project selection based on community needs assessment (CNA) and unique needs of the community
- Clinical Focus: Long Term Care / Primary Care / Behavioral Health





**MHPWQ** inc.  
Mental Health Providers of Western Queens Inc.

# NYP/Q PPS Partners



┌ NewYork-Presbyterian  
└ Queens



The Silvercrest  
Center  
for nursing  
and rehabilitation

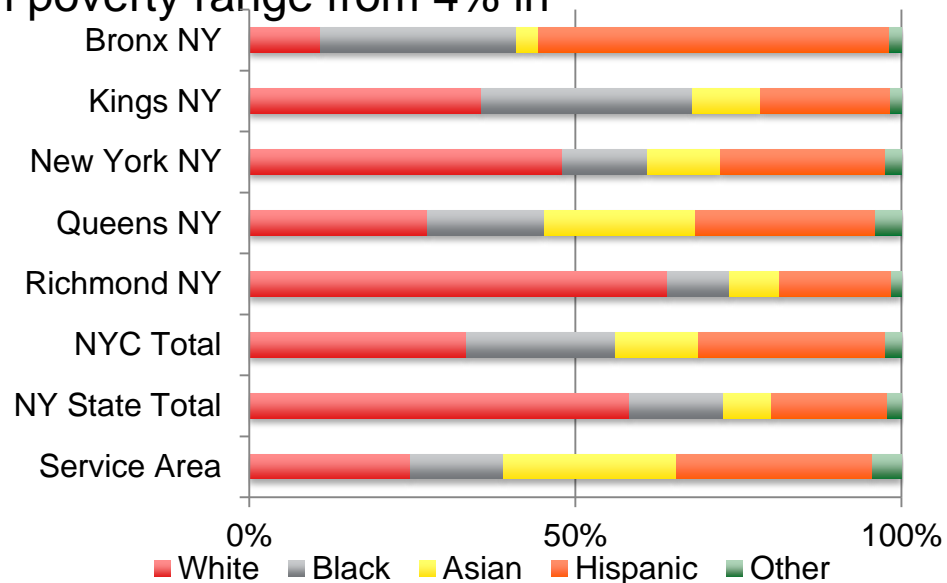


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┌ NewYork-Presbyterian  
└ Queens

- Queens County is a large, diverse community and growing at 0.5% annually
- Medicaid Population
  - 692k of the 916k Medicaid Beneficiaries in Queens County are located in the NYP/Q PPS service area
  - Medicaid beneficiaries make up 41% of Queens County and 43% of the PPS Service area
  - Queens County has lower poverty rate at 14.4% than NYC, 19.9%
    - Significant disparity of families living in poverty range from 4% in Whitestone to 23.8% in Jamaica

	White	Black	Asian	Hispanic	Other
<b>NY State</b>	58.2%	14.4%	7.3%	17.6%	2.2%
<b>Service Area</b>	24.7%	14.2%	26.4%	30.0%	4.4%



## Domain 2

### 2.a.ii Increase Certification of **Primary Care Practitioners with**

- PCMH** certification and/or Advanced Primary Care Models (As developed under the NYS Health Innovation Plan (SHIP))

- 2.b.v Care Transitions** for Skilled Nursing Facility (SNF) Residents

- 2.b.vii** Implementing the **INTERACT** project (Inpatient Transfer Avoidance Program for SNF)

- 2.b.viii Hospital-Home Care** Collaboration Solutions

## Domain 3

- 3.a.i** Integration of **Primary Care & Behavioral Health Services**

- 3.b.i** Evidence Based Strategies for Disease Management in **High Risk**/Affected Populations (Adult Only)

- 3.d.ii** Expansion of **Asthma Home-Based** Self-Management Program

- 3.g.ii** Integration of **Palliative Care** into Nursing Homes

## Domain 4

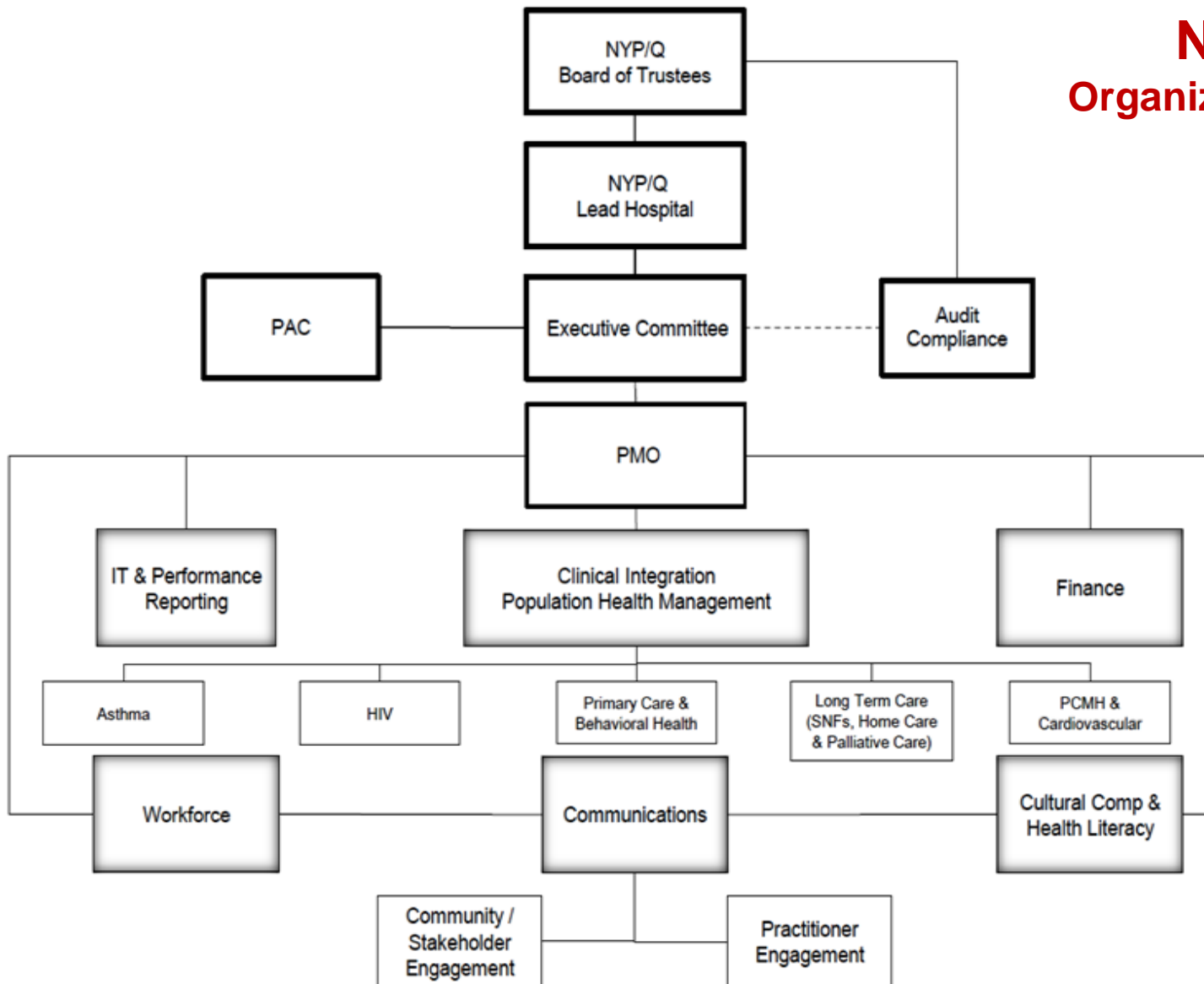
- 4.c.ii** Increase **Early Access to, and Retention in, HIV Care**

# NYP/Q PPS

## Organizational Structure

- Collaborative contracting model
- Executive Committee consists of 12 members representing key initiatives and DSRIP partners:
  - Lead Hospital
  - IT
  - Workforce
  - Finance
  - Behavioral Health
  - Long Term Care
  - Home Care
  - Community Based Organization
  - Community Member (ex-officio)
- All project committees have clinical representation of subject matter experts from all of our partners

# NYP/Q PPS Organizational Chart



\*Sub-Committees & Workgroups will be formed as needed.

- **Speed of DSRIP program**
  - 5 years to transform the healthcare of the community
- **Public Health Challenges**
  - Cultural beliefs related to end of life care (Palliative Care project) for families and physicians
  - Melting pot of patient diversity to include cultural and life choices
  - Cultural sensitivity of behavioral health needs



## ▪ Collaborative Model Dynamics

### - Value Based Payment (VBP)

- Collaborative model does not allow for cross organization managed care negotiations

### - Workforce

- Regulatory limitations for cross partner data sharing & strategic planning
- Aligning clinical strategy with workforce impact and needs

### - Access to patient level Domains 3 & 4 metric data

- To ensure rapid cycle improvement at the partner level
- Real time data is imperative for rapid cycle improvements

## **Collaboration**

### **- *Community Engagement* –**

- Community member on Executive Committee
- Town-hall Meetings held bi-annually to highlight partner best practices, provide project updates, answer stakeholder questions, and involve media to capture a broader audience
- Community Advisory Council presentations allow for access into other community organizations

### **- *Partner Engagement* –**

- Utilizing established partner relationships to build trust in network for partner engagement & development
- Partners are members of organizational, clinical, and Executive committees

## Collaboration

- ***PPS Engagement*** –
  - NYP PPS collaboration with a focus to VBP and Cultural Competency
  - Conversations with Mount Sinai PPS regarding behavioral health project to discuss overlapping partners and engaged patient processes
  - Active participation in the New York City DOMHH HIV Collaborative and the PPS Cultural Competency & Health Literacy Collaborative
- ***CBO Engagement*** –
  - Executive Committee approved contracts with the following CBO's that are actively involved in project implementation:
    - Asthma Coalition of Queens
    - Queens Coordinated Care Partnership (Health Home)
    - Elmcour Youth & Adult Activities (OASAS)

## **Primary Care / Chronic Disease**

### **- *PCMH***

- Hired consultant to work with partners to achieve PCMH certification
- Current state assessment completed
- A number of partners on track for PCMH certification by Summer 2016

### **- *Asthma Home Based Care***

- Asthma Coalition of Queens County engaged & defining programmatic strategy
- St. Mary's Children's Home Care engagement for community nurses
- School based behavioral clinic engagement through partnership with Mental Health Providers of Western Queens to identify asthma triggers for intervention

- ***Increase Access to HIV Care***

- Expanding Prep and PEP access in Designated AIDS Center
- Screening for risk behaviors
- NYS Collaboration – DOH and multiple PPS's to define need and strategy

- ***Primary Care & Behavioral Health Co-Location***

- Locations identified to co-locate
- Best practices outlined & approved by committee
- Behavioral partner educating primary care partners on depression and substance abuse screenings

## Long Term Care

- ***INTERACT***
  - Current state completed
  - Partners engaged in roll-out planning
  - IT Tools identified to maximize partner communication
  - Training all levels of providers on IT Tools & INTERACT
- ***Care Transitions***
  - Allscripts Care Director identified as best practice tool & training underway
- ***Palliative Care***
  - eMOLST training roll-out underway
- ***Home Care***
  - Partners engaged in roll-out & communications plan

# NYP/Q PPS Organizational Updates

## **Workforce**

- RFP in progress for the Compensation & Benefit Analysis
- Training needs outlined based on project based budgets
- 1199 Training & Education Fund (TEF) will be contracted based on the training needs outlined

## **Cultural Competency & Health Literacy**

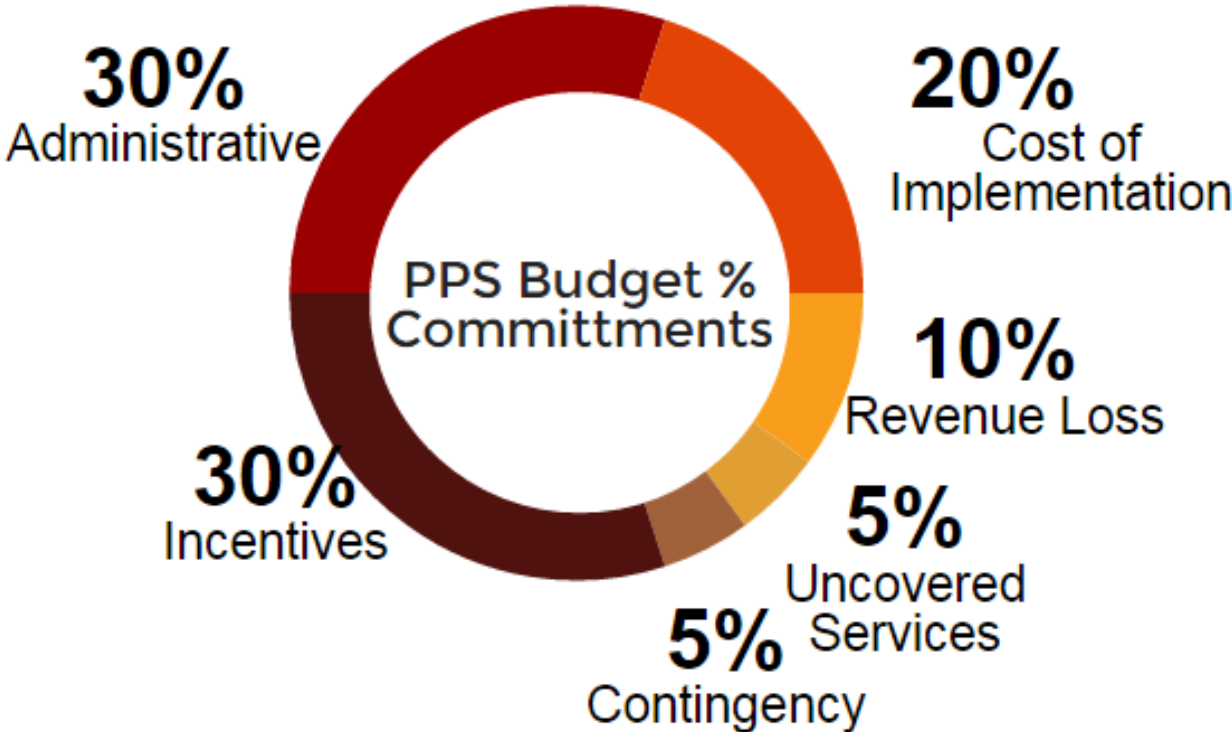
- Strategy developed to align with the 'Culture of One', roll-out underway
- Committee comprised of partners, physician champions, and patient experience executives



## **Budget**

- Budgets developed by project to align the need of the partners to the expected deliverables of each unique project
- Risk based budgets were completed and used to inform the strategy of implementation
- Administrative Overhead and Cost of Implementation forecasts for DY1-DY5 were created to ensure alignment of the need with the commitments made of spending by category
- Detailed budgets were approved by project committees and the Executive Committee

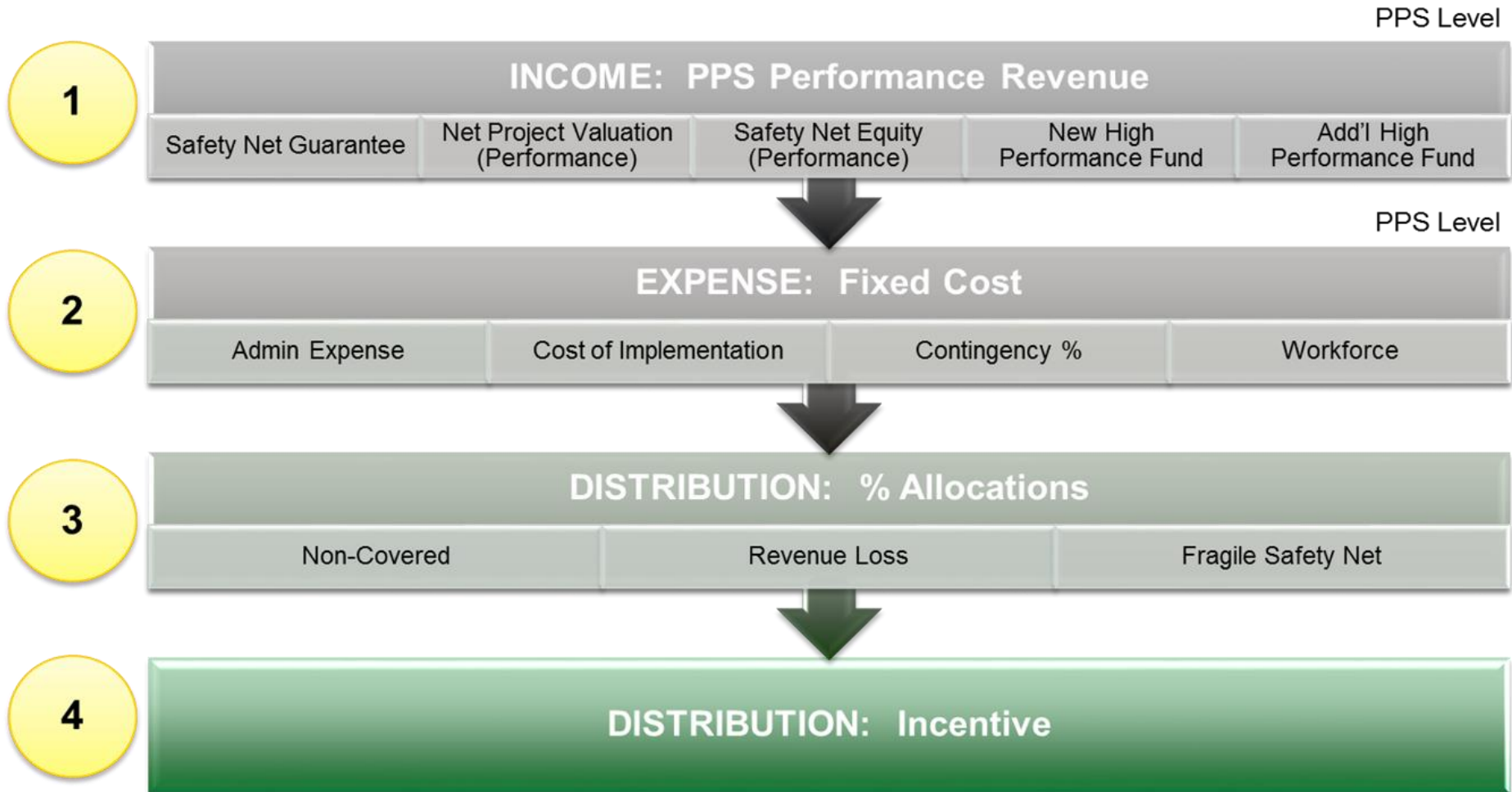
**Budget**



## **Funds Flow Model**

- Funds flow distribution method was created utilizing 19 basic partner principles
- Aligns with performance based indicators while being a risk based model
- Incentive categories align with project requirements, scale & speed, and EIP measures (TOM, MAX, RHIO, HIV) with anticipation to add Domains 3 & 4 metrics when partner level data is available
- Model was built using actual partner data and continuous input from the legal team to ensure compliance with regulatory issues
- Addendums to the business associate agreements were customized to align with each funding category of the distribution method
- Calculations will be reported to the Executive Committee quarterly & updated based on the need of the programs or additional developments in DSRIP expectations

# Funds Flow Model



## **Partner Contracting**

- Phase I Contract Underway
  - 31 Partners identified based on project engagement or need
    - 19 Contracts signed to date
      - Home Care agencies
      - Skilled Nursing Facilities
      - Behavioral Health Providers
      - FQHC
      - CBO
- Second round of contracting to begin February 2016

### Partner Payments

- Partner Payment #1 anticipated by the end of January 2016
  - Includes Phase I contracting providers
  - Payment includes funding categories of:
    - Revenue Loss
    - Non Covered Services
    - Incentives : MAX series, RHIO Pilot, HIV Collaborative, CBO involvement
  - Over 60% of funds distributed to non-hospital providers
  - Partner types included:
    - Behavioral Health
    - CBO
    - Clinic
    - PCP
    - SNF
    - Other
    - Hospital

## **Partner Payments, cont.**

- Partner Payment #2 anticipated by the end of February 2016
  - Includes Phase I & II contracting providers
  - Payment includes funding categories of:
    - Revenue Loss
    - Non Covered Services
    - Incentives : MAX series, RHIO Pilot, HIV Collaborative, CBO involvement
    - Incentives : Engaged Patient Count

## **Information Technology**

- RHIO Pilot underway with 10 partners to provide resources and incentive funding for connectivity
- New York eHealth Collaborative (NYeC) contract signed to provide partners with an additional resource for identification of an electronic medical record
- Allscripts Care Director roll-out in process for multiple partners to engage in a population health management tool to monitor patient activity



## **Performance Reporting**

- An Executive Dashboard has been created and will be reported to the Executive Committee quarterly to ensure strategic changes are made based on key performance indicators (KPI)
- PPS Executive Summaries are utilized during monthly KPMG meetings to enable effective communication and highlight progress or issues
- Partner based performance reporting policies are in development to outline monthly and quarterly expectations
- Performance Logic, a project management tool, is being utilized to ensure tracking & efficient project management for all tasks and milestones
- MAPP scorecards and reports along with internally built tools are utilized to populate performance reports

# NYP/Q PPS Organizational Updates

## AV SCORECARD

PPS Information	
Quarter	DY1, Q2 July 1, 2015 - September 30, 2015
PPS	New York-Presbyterian/Queens
PPS Number	40

Achievement Value (AV) Scorecard Summary								
Project Link (click on the purple link below to access each individual project report)	AV Data				Payment Data			
	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned
<a href="#">Domain I - Organizational (All Projects)</a>	5.00	5.00	0.00	5.00	<i>Organizational funds are embedded within each project's payment</i>			
<a href="#">2.a.ii</a>	21.00	21.00	0.00	21.00	\$ 43,903.72	\$ 43,903.72	\$ -	\$ 43,903.72
<a href="#">2.b.v</a>	21.00	21.00	0.00	21.00	\$ 54,694.11	\$ 54,694.11	\$ -	\$ 54,694.11
<a href="#">2.b.vii</a>	21.00	21.00	0.00	21.00	\$ 49,176.14	\$ 49,176.14	\$ -	\$ 49,176.14
<a href="#">2.b.viii</a>	21.00	21.00	0.00	21.00	\$ 51,250.88	\$ 51,250.88	\$ -	\$ 51,250.88
<a href="#">3.a.i</a>	16.00	16.00	0.00	16.00	\$ 44,256.16	\$ 44,256.16	\$ -	\$ 44,256.16
<a href="#">3.b.i</a>	13.00	13.00	0.00	13.00	\$ 33,082.18	\$ 33,082.18	\$ -	\$ 33,082.18
<a href="#">3.d.ii</a>	10.00	10.00	0.00	10.00	\$ 35,739.23	\$ 35,739.23	\$ -	\$ 35,739.23
<a href="#">3.g.ii</a>	11.00	11.00	0.00	11.00	\$ 31,410.35	\$ 31,410.35	\$ -	\$ 31,410.35
<a href="#">4.c.ii</a>	16.00	16.00	0.00	16.00	\$ 23,984.33	\$ 23,984.33	\$ -	\$ 23,984.33
<a href="#">AV Adjustments (Column F)</a>								
<b>Total</b>	<b>150.00</b>	<b>150.00</b>	<b>0.00</b>	<b>669.00</b>	<b>\$ 367,497</b>	<b>\$ 367,497</b>	<b>\$ -</b>	<b>\$ 367,497</b>

Delivery System Reform Incentive Payment (DSRIP)

Executive	
<b>Overall Performance</b>	
PPS overall met expectations of performance based on milestones, steps, project requirements, and financial.	
<b>Network Development / Partner Engagement</b>	
Phase I partner contracting underway - 19 of 31 contracts signed as of January 21, 2016. No additional providers identified at this time for network development. Communications strategy roll-out underway.	
<b>Project Management Office</b>	
Interim Director & Manager positions filled Project Coordinator position filled - begins February 2, 2016 Recruitment underway for Director, Data Analyst, Population Health Manager	



Operations		
Domain 1 Process Milestones		
# Milestones	Achieved	Not Achieved
# Steps	Completed	Date Changed

Quarter-3 MAPP entry & reconciliation underway



Workforce
Under Development NYS Workforce Baseline & Expectations due 3/31/16

Quality / Performance	
<b>Domain 1 Scale &amp; Speed / Project Requirements</b>	
2.a.ii	2.b.v
2.b.vii	2.b.viii
3.a.i	3.b.i
% Achieved	
3.d.ii	3.g.ii
4.c.ii	
% Achieved	
<b>Domains 2 - 4 Performance Measures</b>	
Measures under review or not meeting goal expectations	



Financial					
Anticipated AV \$ per Milestone					
Domain 1 - ORG	Workforce	Governance	Cult.Comp	Budget	
Domain 1 - Scale/Speed					
Domains 2-4 Performance					
PPS Expense to Budget					
	YTD Actual	YTD Budget	YTD Variance	% of Rev	Variance to % Baseline
AOH					
COI					
Non-Cov					
Rev Loss					
Contingency					
Workforce					



Legend	
	On Target for Deliverables
	Caution or Risk of Not Meeting Expectations
	Not Meeting Expectations

Mitigation / Action Plan - Not Meeting Expectation KPI's

- Clinical Implementation of projects at the partner level based on unique needs of each partner
- Continuation of partner contracting with a phased approach based on engagement in project
- Roll-out a communications strategy to ensure full engagement of stakeholders
- Refinement of performance reporting and the utilization of Performance Logic
- Workforce planning & development based on partner feedback of current state
- Value Based Payment (including EIP / EPP) managed care organization negotiations & partner planning
- Development of the PMO to include hiring for rapid cycle evaluation unit to focus to Domains 3 & 4 metrics

# PPS Contact

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# Questions?