



**Department
of Health**

Medicaid
Redesign Team

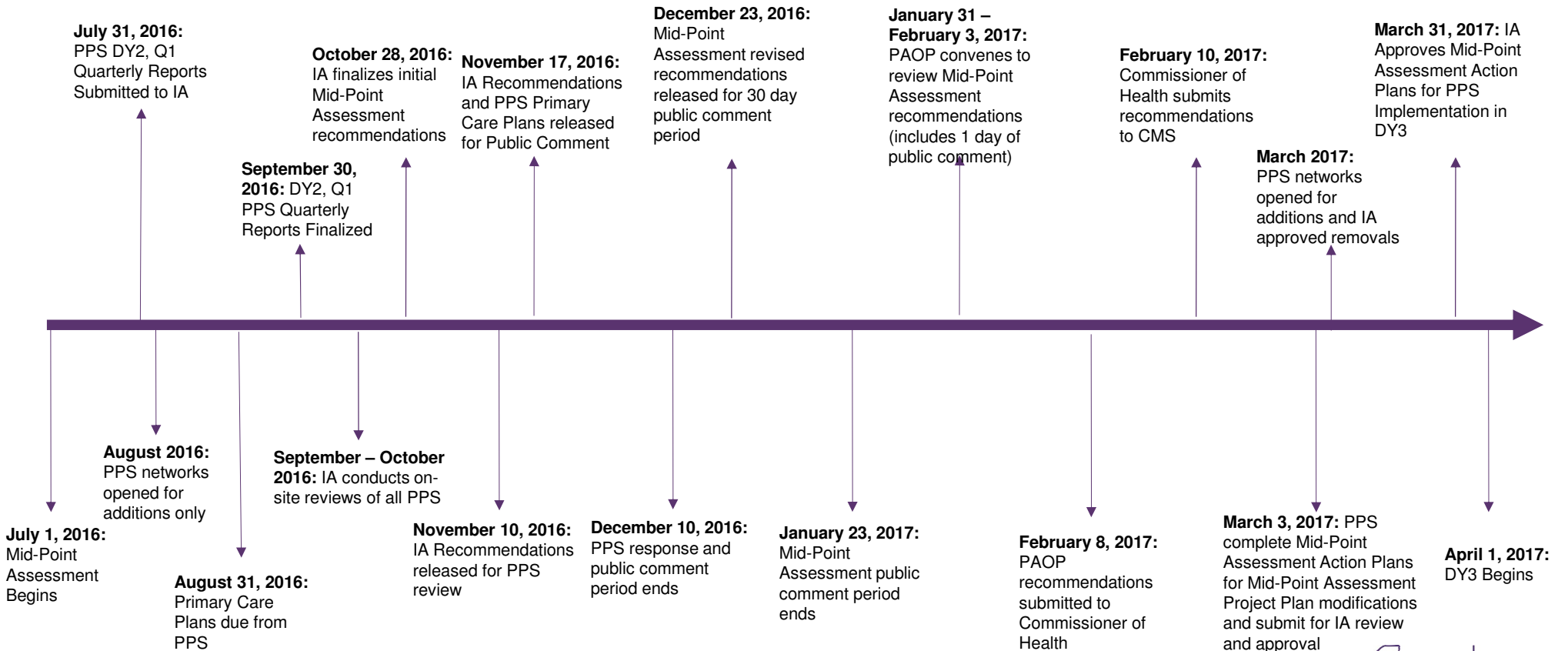
Mid-Point Assessment Timeline and Process

Project Approval and Oversight Panel Meeting

October 7, 2016

October 2016

DSRIP Mid-Point Assessment Timeline



Mid-Point Assessment Overview

- The Mid-Point Assessment is a required component of the New York Delivery System Reform Incentive Payment (DSRIP) Program.
 - It is defined in Section VIII.11.d of the Standard Terms and Condition (STCs) of the 1115 waiver.
 - The requirements of the Mid-Point Assessment are further defined in Section VI.d of Attachment I to the STCs.
- The Mid-Point Assessment is intended to provide a review of PPS progress towards the implementation of the approved DSRIP Project Plans for compliance with the program requirements identified in the STCs and to determine any modifications necessary to ensure PPS success through the remaining years of the program.

Mid-Point Assessment Overview

- The requirements of the Mid-Point Assessment include an assessment of:
 - Compliance with the approved DSRIP Project Plan;
 - Compliance with the required core components for DSRIP projects described in the DSRIP Strategies Menu and Metrics;
 - Non-duplication of Federal funds;
 - Analysis and summary of relevant data on performance on metrics and indicators to this point in time;
 - The benefit of the project to the Medicaid and uninsured population and to the health outcomes of all patients served by the project;
 - Project governance including recommendations for how governance can be improved to ensure success;
 - The opportunity to continue to improve the project by applying any lessons learned or best practices that can increase the likelihood of the project advancing the three part aim; and
 - Current financial viability of all lead providers participating on the DSRIP project.

Mid-Point Assessment Process

- The Independent Assessor will be responsible for conducting the Mid-Point Assessment and will rely on the following key data sources:
 - Approved DSRIP Project Plans
 - PPS Quarterly Reports – DY1, Q1 through DY2, Q1
 - The PPS activity through DY2, Q1 will serve as the basis for the Independent Assessor’s Mid-Point Assessment review to ensure that all Mid-Point Assessment tasks are completed prior to the start of DY3.
 - PPS will be able to use the progress demonstrated through the DY2, Q2 PPS Quarterly Report to support responses to the Independent Assessor’s recommendations or the PPS recommendations.
 - Claims and non-claims data for P4R/P4P measures
 - PPS Lead Financial Stability Test (to be submitted by the PPS lead, requirements consistent with DSRIP Project Plan Application)
 - 360 Survey of PPS Network Partners
 - PPS Project Narratives
- The Independent Assessor will review the PPS project plan for overall compliance and each individual project being pursued by the PPS to assess likelihood of project success.
 - The assessment of individual projects will focus on AVs earned to date and PPS progress towards required project milestones through DY2, Q1 with focus on milestones that cross multiple projects.
 - Examples include PCMH Level 3 certification and the implementation and use of EHRs to share data and track patient engagement across the PPS.

360 Survey

- As part of the Mid-Point Assessment, the IA will be conducting a 360 Survey of PPS network partners to capture additional details on PPS engagement with their partners
 - The survey will be conducted via a web-based platform with an option for a paper based survey for partners that are unable to complete an online survey
 - The survey was planned for released on August 15, 2016 with responses due by September 30, 2016
- The network partners that will be selected for participation in the survey will be based on those partners the PPS has engaged for project implementation
 - The selected partners will represent a cross-section of all provider types in the PPS network
 - The selected partners will be identified in mid-July and contact information for the selected partners will be requested from the PPS at that time
 - Selection may also account for partners who have attended PAC meetings and labor representation
- Survey questions will focus on the network partners and their level of engagement in the PPS across key areas such as:
 - Governance
 - Contracting and Funds Flow
 - Performance Management
 - IT Solutions

Mid-Point Assessment Narratives

- As part of the Mid-Point Assessment, PPS will be required to submit narratives with the DY2, Q1 PPS Quarterly Report for each of the projects the PPS is implementing as well as for the PPS organizational efforts
- The Project Narratives will ask the PPS to respond to 5 items:
 - Describe PPS progress on project implementation to date
 - Describe any challenges or barriers to project implementation the PPS has encountered to date
 - Describe how the PPS has overcome those challenges/barriers or what is the PPS plan to overcome those challenges/barriers
 - Describe any project success to date or best practices identified through project implementation activities
 - Describe any changes to the patient population to be served by the project based on changes in the community needs
- The PPS will be able to submit an organizational narrative that covers all organizational components and will allow the PPS to highlight any organizational successes
 - This narrative can highlight PPS success across areas such as Governance, Workforce, Cultural Competency and Health Literacy, and VBP
- PPS will also be tasked with completing the Primary Care Plan by August 31
 - The Primary Care Plans will be subject to Public Comment during the November Public Comment period with the initial Mid-Point Assessment recommendations

Mid-Point Assessment Process

- The Independent Assessor will develop recommendations based on the Mid-Point Assessment reviews that may include, but are not limited to, the following:
 - Continuation of PPS Project Plan;
 - Modifications to the approved project plans, such as a change in a project or projects selected for implementation by a PPS;
 - Changes to the PPS Lead entity;
 - Consolidations of multiple PPS in to a single PPS;
 - Discontinuation of a PPS' Project Plan;
 - Other remediation or improvements to increase the likelihood of PPS project success
 - Adding new providers to PPS network to assist in meeting PPS performance goals; or
 - Replication of best practices of other PPS.
- The Independent Assessor's recommendations will be released to the PPS and the public for an initial comment period.
 - The PPS will be able to submit responses to the Assessor's recommendations during this comment period.
 - The PPS will also be able to submit additional recommendations to the Independent Assessor during this period.

Mid-Point Assessment Process

- Final Mid-Point Assessment recommendations, inclusive of Independent Assessor and PPS recommendations, will be submitted to DOH and released for a final 30 day public comment period.
- The final Mid-Point Assessment recommendations will be subject to review by the Project Approval and Oversight Panel.
 - The Panel session will also include a day of public comment.
- The recommendations from the Panel will be submitted to the Commissioner of Health with the Commissioner's recommendations submitted to CMS.
- PPS will be expected to implement any project plan modifications as recommended through the Mid-Point Assessment by March 31, 2017.

Mid-Point Assessment Network Modifications

- In addition to the Mid-Point Assessment review process conducted by the Independent Assessor, the PPS will have the ability to assess their provider networks.
- PPS will be able to request the removal of network partners at the Mid-Point Assessment.
 - Partner removals cannot exceed 10% of the total PPS network.
 - PPS must have documented cause for the removal of any network partners.
- PPS can also seek an assessment of the Safety Net status for any network partners that are not currently Safety Net providers.
 - The Safety Net determination process will follow the Safety Net appeals process and will rely on more recent data to make the determination of Safety Net status.