

**Consolidated HH/MCO Workgroup
Financial Feasibility Sub-committee**

August 8, 2013 Meeting Notes

Attendees:

Deirdre Astin (NYSDOH)
Lana Earle (NYSDOH)
Jackie Friedman (NYC DOHMH)

John Godfrey (AIDS Institute)
Douglas Ruderman (NYSOMH)
Lisa Tackley (AIDS Institute)

Pat Adams (Catholic Charities)
Ray Bizzari (Cayuga County DCS)
Cathy Clancy (Hudson Health Plan)
Jessica Fear (VNSNY)
Nicole Jordan-Martin (BAHN/Montefiore)
Rebecca Krakauer (VNSNY)
Miriam Martinez (Continuum HH)

Deb Peartree (Greater Rochester HH)
Andresa Person (VNSNY)
Neil Pessin (VNSNY)
Lou Santiago (GBUAHN)
Mike Stoltz (Clubhouse of Suffolk)
Shari Suchoff (Maimonides/BHH)
Boris Vilgorin (FEGS/CBC)

The initial sub-committee meeting convened at 3 p.m., both in-person and by telephone conference. Introductions were conducted and the co-chairs (Jessica Fear and Nicole Jordan-Martin) led the proceedings. Meeting agenda items and their corresponding discussions are represented below:

- I. Review of the goals/sub-committee charter
 - a. There was general agreement with the content of the sub-committees charter document.

- II. Suggested major topics to schedule for future discussion
 - a. There was general agreement with the 6 starter topics proposed by the co-chairs (staffing to caseload ratio, GNYHA Financial Modeling Survey results, Overlap with CRG group, best/worst/break even budget scenarios for HH services, financial impact for converting programs if legacy rates are phase out/changed, and financial impact of billing workflow changing).
 - b. The sub-committee agreed to also deliberate the construction of the base payment rate.
 - c. It was noted that the financial impact of changing the billing workflow is important from a timing/preparation perspective—questions about this to be sent to Lana Earle and Deirdre Astin.
 - d. Neil Pessin agreed to follow up with GNYHA regarding the status of financial modeling survey of health homes in late 2012.

- e. Neil Pessin will report back from the CRG/Acuity sub-committee on issues that may overlap with the deliberations of this sub-committee.
- f. Future considerations include: financial model, i.e., Medicaid ACO, cost of ramping up to deal with specialized populations; TCMS have had other dollars to do creative things, i.e., member incentives.
- g. Douglas Ruderman advised that OMH is still committed to maintaining wraparound dollars for the SMI population and dollars for non-Medicaid eligible population.
- h. Lana Earle advised that DOH intends to work with CMS to develop a shared savings model; an MRT will convene this fall to focus on this initiative; will review member utilization 6 months post-enrollment; expected to be implemented summer'2014. There are also MRT items related to children.
- i. The sub-committee identified additional activities that have a cost attached to them, and should therefore be considered in deliberating future payment/financial model:
 - o Additional reporting and data exchange with health plans
 - o Data analytics
 - o Administrative costs for care management agencies with multiple HH relationships
 - o Liability insurance (including HIT and exchange)
 - o RHIO subscriptions
 - o HR recruitment and management
 - o Financial management (including billing/reporting costs)
 - o Marketing
 - o Legal consultation
 - o 24hr X 7 days call center operations
 - o Training

III. Follow-up items and next steps

- a. Sub-committee members to forward templates and assumptions that they are using to project staffing and membership, to the co-chairs. The co-chairs will compile and generate a standard template/assumptions for review.

IV. Scheduling next meeting

- a. It was agreed that the next meeting would be a working meeting, ideally 3 hours and face-to-face to facilitate ease of document review and substantive deliberation of several issues.