Please answer each of the following questions thoughtfully and concisely. Note that you will only be able to enter your responses within the grey form fields, and that many, if not all, of these forms have word limits.

Contact Information

Please provide contact information for the individual completing this questionnaire. Note that as this questionnaire will be used to assist NYS DOH in determining whether your PPS will receive the second design grant award payment, please note that the individual certifying this questionnaire should be the CEO, CFO or comparable level personnel.

Date: 10/10/2014

Provider Name**:** Catholic Medical Partners -Accountable Care

Contact Name: Dennis Horrigan

Contact Email: dhorriga@chsbuffalo.org

Contact Phone: 7168622162

PPS Status

The following questions relate to whether your PPS is continuing to finalize formation, and intends to complete your own DSRIP Project Application due on December 16, 2014.

1) Does your PPS plan to submit a DSRIP Project Plan application as a standalone PPS on December 16, 2014*?* If your PPS does not intend to continue operating as standalone PPS (e.g., your PPS has dissolved due to merger with another PPS or has decided to cease participation in the DSRIP program), your answer to this question should be 'No'. *If 'Yes', please skip the next two questions and complete the rest of the Design Grant Questionnaire. If 'No', please continue to the next question in this section.* (*3 character limit*)

   yes

2) Is your PPS merging with another PPS? If yes, please explain in detail your plan to integrate and support the merged PPS (e.g., please describe specific projects and activities). If awarded a second design grant payment, please provide a narrative explaining your intentions with the funding awarded. If your PPS is not merging with another PPS and is planning to cease participation in the DSRIP program, please answer 'No' to this question and answer the next question. *(3,000 character limit)*

3) If your PPS has elected to cease participation in the DSRIP program, please provide an explanation as to why your PPS has made this decision. *(3,000 character limit)*.

Note: If your PPS has elected to merge with another PPS or has elected to cease participation in the DSRIP program as a standalone PPS, please contact the NYS DOH for further discussion.

Award Letters Conditions
The following questions relate to award conditions stated on the August 6, 2014, if applicable to your PPSs.

1) Did your award letter include a condition which must be addressed prior to receiving the second award payment? *Please answer with either 'Yes' or 'No'. If 'Yes', please continue onto Question 2. If 'No', please move onto Question 3. (3 character limit)*

   no

2) Have you addressed your award condition? Please describe the steps taken to address the award condition. (2*,000 character limit)*

3) If you have not fully addressed your award condition, please provide an explanation as to why the condition has not yet been addressed, and plans to satisfy the condition prior to November 3, 2014. Please also reference communication you have had with NYS DOH about this condition to date. (*2,000 character limit)*

Network updates and attestation
The following questions relate to compliance regarding each PPSs DSRIP Network Tool submission and attestation and data sharing requirements.

4) **A.** Has your PPS met the October 1, 2014 deadline to update your partner organization list using the DSRIP Network Tool? *Please answer with either 'Yes' or 'No'. If 'Yes', please continue on to Question 5. If 'No', please move onto Question 4B. (3 character limit)*

   yes

   B. If you have not met the deadline, please provide an explanation as to why this deadline has not been met and what your plans are to remediate. (*2,000 character limit)*

5) **A.** Has your PPS maintained a file of signed partnership agreements from all partner organizations, which can be made available to the State and/or CMS upon request? *If 'Yes', please continue on to Question 6. If 'No', please move onto Question 5B. (3 character limit)*

no

B. If you have not completed this requirement, please provide an explanation as to why it has not been completed and provide your plan to remediate. (*2,000 character limit*)

CMP-AC is working with legal council to develop partner agreements. Draft agreements are avaible and signed agreement are expected to be completed by mid-November, 2014. This is on target with our Design Grant Timeline. All partners provided either verbal or written confirmation(email) to be a partner for the October partner submission.

6) **A.** Has your PPS executed a Data Exchange Application and Agreement ("DEAA") with the State for data available in the DSRIP portal, and any data sharing outside of the portal? *If 'Yes', please continue on to Question 7. If 'No', please move onto Question 6B. (3 character limit)*

yes

B. If you have not completed the above, please provide an explanation as to why these activities have not been completed and provide your plan to remediate. (2*,000 character limit*)

Contract attachments
The following questions relate to contracts submitted to NYS DOH by PPSs regarding renewed grant amounts, for which PPSs were required to resubmit to NYS DOH with the updated grant amounts.

7) Has your PPS returned all contract attachments that need to be completed? If not, please provide a brief status update on your current progress and remediation steps. The required attachments are listed below for your reference. (2*,000 character limit*)

- **APPENDIX A** - Standard Clauses as required by the Attorney General for all State contracts
- **STATE OF NEW YORK AGREEMENT**
- **APPENDIX B-3** - Award Letter
- **APPENDIX B-2** - Webinar 1 and 2
- **APPENDIX B-1** - Questions and Answers 1 and 2
- **APPENDIX C** - Proposal
- **APPENDIX E-1** - Proof of Workers' Compensation
- **APPENDIX E-2** - Proof of Disability Insurance Coverage
- **APPENDIX H** - Federal Health Insurance Portability and Accountability Act ("HIPAA") Business Associate Agreement ("Agreement")

yes

Community Needs Assessment

The following questions address your PPSs progress in completing your Community Needs Assessment ("CNA").

8) Please provide a status update on your CNA's progress versus the timeline stated on your design grant application. (2,000 character limit)

The CNA is progressing ahead of schedule and will be completed before our Design Grant Timeline date of 11/15/2014. Some initial results of CNA planned activities will be made available by the contractor, University of Buffalo Regional Institute, in mid-October. These results will be presented in community forums to elicit feedback and facilitate additional planning during the week of 10/20/2014.

9) Please describe your stakeholder and community engagement process. (2,000 character limit)

The original 7 applicant PPSs representing the 8 counties of Western New York, including the 4 PPS's that did not receive Design Grant awards, have been convening regularly with the support of a local health foundation in a combined effort to contract/review/select/negotiate & guide one comprehensive regional CNA for WNY. This PPS group has representation from every sector of health care (FQHC, Hospital, Long Term Care, Home Care, Health Homes, Primary Care, behavioral & mental health, etc.) as well as community based organizations (Housing, Government, Social Service Agency, Education, etc.), which has enabled the creation of a broad based list for engagement. The results are a CNA process which includes stakeholders, providers and community members from geographic, cultural and economically diverse populations across the eight counties of Western New York. The contractor, University of Buffalo Regional Institute (UBRI), is leading paper & electronic surveys, conducting face-to face interviews with stakeholders, and providing analysis and interpretation of existing data. The assessment includes all of the required components of the assessment including geographic listing of community services and health care providers including hospitals, physician practices, health home, skilled nursing facilities, hospice, behavioral health, substance abuse and services for the developmental disabled. In addition we have collected approximately 7,000 client surveys that have been completed with the assistance of our PPS partners and the general community. These survey results will enable us to identify barriers and opportunities to improve access, availability, and to create safety net services to overcome social and economic obstacles to quality medical care and service. The UBRI has also interviewed over 50 providers from our geographic area to hear firsthand what factors need to be overcome to meet the quality and utilization goals of the DSRIP program. In

10) Please describe your needs assessment methodology, specifically regarding data collection and reporting. (2,000 character limit)

In addition to qualitative and perceptual data generated by community conversations, provider interviews and user surveys, the CNA is being developed through a combination of public demographic data (e.g. for age, sex, ethnicity, income, poverty status and more), population health data from NYSDOH and from the DSRIP data sets. The contractor is analyzing data on preventable inpatient admissions, avoidable readmissions and unnecessary ER services to construct and map a comparison of health care utilization, quality of care, and health status metrics on relevant indicators. Analyses and maps will show variations of these factors by selected payer groups (i.e. Medicaid eligible and the general population) to illustrate differences in access to care. These analyses and maps will identify high

need communities or target populations to inform selection of programs to improve health status, improve the quality of care, and reduce unnecessary costs. Such analyses will identify the actual number of Medicaid patients in need of interventions to the extent such data is available of the DSRIP cite.

This analysis will be organized around the domain areas specified in the DSRIP program, for example: Domain 2, avoidable admissions, prevention quality indicators; Domain 3, cardiovascular disease, HIV/AIDS, etc., and Domain 4, mental health, chronic disease for Domain 4) to produce aggregate indices of health status at the community and county levels. Comparison of communities within the region with each other, and with communities across New York State, will suggest where attention is most warranted. To ensure an "apples-to-apples" comparison of communities US Census based Rural Urban Commuting Area (RUCA) codes will be used to classify ZIP codes and Eberts codes will be used to classify counties in WNY to ensure that rural communities are compared with rural communities and urban with urban.

11) Please describe any challenges and/or significant deviations encountered during the completion process of your CNA. (*2,000 character limit*)

Time has been the greatest challenge. The work that we are expected to accomplish would normally have been done over a significantly longer period of time allowing for greater engagement, additional data collection and more thoughtful & comprehensive analysis.

Cultural Competence and Health Literacy
The following questions address your PPSs progress achieving cultural competence and improve health literacy.

12) Please provide a status update on your process to identify cultural competence challenges and achieve a culturally competent organization that targets the needs of your community. (*2,000 character limit*)

This process is just beginning, and is an element considered in the selction of the PAC membership which wil guide all project work.

13) Please provide a status update on your approach to improving the health literacy of patients who will be served by your PPS. (*2,000 character limit*)

CMP-AC PPS will begin improving health literacy through education at the physician office level and in larger patient/community forums. This work will begin (as related to DSRIP) with our first community engagement meeting around the results of the CNA during the week of 10/20/2014.

Project Advisory Committee
The following questions relate to your activities in forming your Project Advisory Committee ("PAC"), structure of your PAC, activities undertaken, and future plans.

14) Please provide a status update of PAC activities to date. For example, please address PAC projects and activities undertaken, as well as frequency of PAC meetings. (*2,000 character limit)*

The CMP-PPS Project Advisory Committee is comprised of 12 members representing the initial 10 projects selected by the group. The PAC has come together three times along with the full group of partner representatives. A few PAC subcommittees are actively engaged in work on their specific project(s), meeting regularly and developing the framework for the DSRIP application. Some PAC subcommittees have been delayed due to uncertainty over the final selection of DSRIP projects. During August and September, the initial 7 PPS applicants met with facilitation almost every two weeks, with phone conferences in between, to discuss collaboration, mergers, and other potential alignments. After this intense work effort, seven PPSs combined into just two, ECMC and CMP AC-PPS. The remaining PPSs continued to negotiate project selection to be more impactful on a regional basis and to reduce the burden on community providers of working on all original 21 DSRIP projects. In the first week of October, the remaining PPSs agreed on seven shared projects, and three projects specific to their own PPS. With this process completed, CMP-AC is scheduling the remaining PAC subcommittees meetings and activities.

Governance Structure

The DSRIP FAQs contain specific guidance such as ensuring the Governing Committee is regionally representative, includes subject-matter experts, and includes union and worker representation, among other recommendations. Please ensure that you address each of the suggestions in the FAQs. The following questions relate to the structure of your Governing Committee.

15) The DSRIP FAQs and the design grant application provide direction on how to form PACs using an alternate structure. Specifically, PPSs are encouraged to form a smaller Governing Committee of no more than 25 members, which is then supported by subcommittees. How many representatives comprise your PPSs Governing Committee? (*10 character limit)*

10

16) Please list all of the subcommittees that fall under your Governing Committee, and briefly explain how the Governing Committee and sub-committees currently collaborate within your PAC structure. *Please list your subcommittees in the table below and provide your collaboration explanation in the text field below the table.* (*2,000 character limit)*

#	Subcommittee
1	Finance
2	Contract
3	Project Advisory Committee
4	Data Governance
5	Clinical
6	Membership/Performance
7	Compliance
8	
9	
10	

11	
12	
13	
14	
15	

The CMP-AC PPS Governing Committee meets weekly as a group with individuals representing the seven subcommittees: finance, contract, PAC, data/IT governance, clinical, membership and compliance along with other subject matter experts. The Governing Committee has been intensely engaged in the consolidation and re-alignment of regional PPS groups and projects for the past two months and is now shifting its focus to support the development of the PAC working subcommittees. Governance subcommittees are providing financial analysis, data and support to the PAC projects that are actively underway. The Data/IT governance committee has completed a comprehensive IT assessment of all the partner organizations which will be made available to the PAC. The contract committee is engaged with legal counsel to develop partner agreements and performance/membership parameters. Partner lists are being reviewed to determine partners/collaborators/vendors roles to address any gaps in participation/resources/coverage.   Where needed, partners have been provided with support toward the achievement of safety net status and IAAF funding. The Governance Committee has completed preliminary business modeling which will be adjusted to reflect new project selections and provided to the PAC for analysis and planning.

Design Grant Funding Spend
The following questions address how your PPS has spent the first payment of design grant funds and plans for the second payment. NYS DOH is interested in determining whether your PPS has spent the funds in accordance to what was submitted in the design grant application, and ensure PPSs are on track to finalize their Project Application. You are not expected to provide a detailed list of funds spent.

17) Please provide an overview of how the first grant payment was used to assist your PPS during the design phase in preparing for your Project Application. Please ensure your response addresses the budget and narratives submitted in your design grant application. (*2,000 character limit)*

Funds have been used for expenses incurred for legal fees, consultants (specific to the community needs assessment), data analysis, wages & benefits of project staff, meeting costs, survey incentives, travel, community engagement and other expenses diretly related to project design and application development. All expenses align with the Budget Cost Categories as submitted in our design grant application.

18) Please provide a percentage estimate of how much of the design grant award first payment has been spent to date. (4 *character limit)*

100

19) Please describe any challenges and/or significant deviations encountered since you submitted your design grant application, as well as how they were addressed. (*2,000 character limit)*

There are two major issues of concern. The community needs assessment is more than twice as expensive as budgeted due to the scope of work required and very short timeframe for deliverables. The PPSs in Western New York contracted jointly for one assessment covering the 8 counties, but this did not save money. The second challenge is the addition of partners from a non-funded PPS without the support of any DSRIP funding that was made available to other combining PPSs in WNY. One PPS is funded at $1.5 million, while CMP-AC and its additional Southern Tier Partners are only funded at $500,000 for the same level of work effort. There is no way to mitigate these challenges without additional funding. Organizations are spending their own resources that were budgeted for other critical projects and operational costs.

20) What projects and activities will the second award payment be used for, if applicable? (*2,000 character limit*)

The second award payment will be spent on legal fees, consultants, salaries of project staff, meeting costs, community engagement and other expenses diretly related to project design and application development.

21) Please list all DSRIP projects that are either confirmed or currently still being considered for implementation by your PPS. Indicate the statuses of each by selecting either "Confirmed" or "Considered" from the drop-down list under the Status column. (*Minimum five projects, maximum fifteen in cases where multiple proposals are still being considered.*)

#	DSRIP Project	Status
1	2ai	Confirmed
2	2bii	Confirmed
3	2bviii	Confirmed
4	2cii	Confirmed
5	3ai	Confirmed
6	3bi	Confirmed
7	3fi	Confirmed
8	3gi	Confirmed
9	4ai	Considered
10	4bi	Confirmed
11		Select One
12		Select One
13		Select One
14		Select One
15		Select One

Completion

Please select "Yes" or "No" from the check box provided and in the space provided, input the name of and title of the person making this certification. As stated in the introduction of this questionnaire, the individual certifying this questionnaire should be the CEO, CFO or comparable level personnel. An electronic signature below is sufficient; a signed and dated copy is not required.

I hereby certify that the information and data on this form is accurate and correct to the best of my knowledge. I understand that this information may be subject to audit and I may be asked to provide documentation in support of my responses.

Name: Dennis Horrigan

Title: CEO

Check box with yes or no: Yes: ☒ | No ☐