



**Department
of Health**

Medicaid
Redesign Team

Mid-Point Assessment Action Plans: PPS Progress through DY3, Q1

October 2017

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Mid-Point Assessment Recommendation Themes

- 22 of 25 PPS had recommendations as a result of the Mid-Point Assessment process.
 - Total number of recommendations ranged from 1 (3 PPS) to 23 (1 PPS).
- Recommendations were organizational or project specific.
- The most common recommendation was the 'Standard Modification' recommendation from PAOP.
 - 14 of the 25 PPS received this recommendation.

The PPS must develop a detailed plan for engaging partners across all projects with specific focus on Primary Care, Mental Health, Substance Used Disorder providers as well as Community Based Organizations (CBOs). The Plan must outline a detailed timeline for meaningful engagement.

The Plan must also include a description of how the PPS will flow funds to partners so as to ensure success in DSRIP.

The PPS must also submit a detailed report on how the PPS will ensure successful project implementation efforts with special focus on projects identified by the IA as being at risk.

These reports will be reviewed and approved by the IA with feedback from the PAOP prior to April 1, 2017.

Mid-Point Assessment Action Plans

- PPS that received at least one recommendation as a result of the Mid-Point Assessment process were required to complete a Mid-Point Assessment Action Plan.
 - Action Plans were due to the IA by March 10, 2017.
 - Action Plans were available for PAOP and public comment on March 20, 2017.
 - Final IA Approval of the Action Plans was completed by April 30, 2017.
- PPS were required to implement Action Plans by the conclusion of DY3, Q2 (September 30, 2017).
- PPS updates on progress towards implementing the Action Plans were provided as part of the DY3, Q1 PPS Quarterly Report in July 2017 and will provide final updates as part of the DY3, Q2 PPS Quarterly Report in October 2017.

Changes to PPS Reporting

Changes to PPS Reporting

- During the PAOP meetings in February 2017, PPS noted limitations of the current reporting tool, the PIT, for Funds Flow and Partner Engagement.
- In response to this feedback, the IA and DOH, created a new tool, the PIT-Replacement to support the reporting of Funds Flow and Partner Engagement.
 - The PIT-Replacement tool provides PPS with more flexibility in identifying and reporting their partners in the category or categories that most accurately reflect how the partner has been engaged by the PPS.
 - The PIT-Replacement also allows PPS to report their 2nd Tier Funds Flow distributions.
 - The Hospital and Case Management/Health Home categories were broken out in to multiple categories to allow for more discrete reporting of Funds Flow.
- Additional clarification was also provided on the reporting of Funds Flow to the CBO Partner Type Category.
 - This category should represent only the Tier 1 CBOs that have received funds from the PPS. Tier 2 and Tier 3 CBOs would be reflected under the appropriate partner category, such as Mental Health, Substance Abuse, Clinic, or Case Management.

PPS Progress on Action Plans

PPS Progress on Mid-Point Action Plans – Funds Flow

- Through the DY3, Q1 PPS Quarterly Report, PPS have increased the amount of funding distributed to partners relative to the funding distributed at the time of the Mid-Point Assessment.

| | Cumulative Funds Flow at MPA (DY2, Q2) | Cumulative Funds Flow at DY3, Q1 | Additional Funds Flow since MPA | % Change in Funds Flow |
|---------------------------------------|--|----------------------------------|---------------------------------|------------------------|
| Total Funds Flow | \$414,267,236 | \$878,498,690 | \$464,231,545 | 112% |
| Non-Hospital / Non-PPS PMO Funds Flow | \$113,408,240 | \$275,487,064 | \$162,078,823 | 143% |

- For the categories highlighted in the Mid-Point Assessment, PPS Funds Flow distributions increased by over 100%.

| Partner Category | Cumulative Funds Flow at MPA (DY2, Q2) | Cumulative Funds Flow at DY3, Q1 | Additional Funds Flow since MPA | % Change in Funds Flow |
|--|--|----------------------------------|---------------------------------|------------------------|
| Practitioner – Primary Care Provider (PCP) | \$14,659,935 | \$38,183,032 | \$23,523,097 | 160% |
| Mental Health | \$9,741,485 | \$27,535,016 | \$17,793,531 | 183% |
| Substance Abuse | \$4,319,963 | \$10,434,092 | \$6,114,129 | 142% |
| Community Based Organizations | \$11,993,454 | \$28,005,068 | \$16,011,614 | 134% |

PPS Progress on Mid-Point Action Plans – Funds Flow

| | As of MPA (DY2, Q2) | | As of DY3, Q1 | | Changes since MPA | |
|--|----------------------|------------------------|----------------------|------------------------|----------------------|-------------------------------|
| | Funds Distributed | % of Funds Distributed | Funds Distributed | % of Funds Distributed | Funds Distributed | % increase in Funds Disbursed |
| Practitioner – Primary Care Provider (PCP) | \$14,659,935 | 3.54% | \$38,183,032 | 4.35% | \$23,523,097 | 160% |
| Practitioner – Non-Primary Care Provider (PCP) | \$2,654,701 | 0.64% | \$5,023,257 | 0.57% | \$2,368,557 | 89% |
| Hospital | \$121,775,967 | 29.40% | \$177,988,322 | 20.26% | \$56,212,354 | 46% |
| Hospital – IP/ED [^] | \$0 | 0.00% | \$69,180,651 | 7.87% | \$69,180,651 | 100% |
| Hospital – Ambulatory [^] | \$0 | 0.00% | \$16,370,372 | 1.86% | \$16,370,372 | 100% |
| Clinic | \$29,687,182 | 7.17% | \$78,114,049 | 8.89% | \$48,426,867 | 163% |
| Case Management / Health Home | \$5,973,274 | 1.44% | \$14,947,177 | 1.70% | \$8,973,903 | 150% |
| Case Management [^] | \$0 | 0.00% | \$2,540,340 | 0.29% | \$2,540,340 | 100% |
| Health Home [^] | \$0 | 0.00% | \$1,677,311 | 0.19% | \$1,677,311 | 100% |
| Mental Health | \$9,741,485 | 2.35% | \$27,535,016 | 3.13% | \$17,793,531 | 183% |
| Substance Abuse | \$4,319,963 | 1.04% | \$10,434,092 | 1.19% | \$6,114,129 | 142% |
| Nursing Home | \$5,476,856 | 1.32% | \$13,810,595 | 1.57% | \$8,333,739 | 152% |
| Pharmacy | \$305,708 | 0.07% | \$1,079,048 | 0.12% | \$773,340 | 253% |
| Hospice | \$739,659 | 0.18% | \$2,762,389 | 0.31% | 2,022,730 | 273% |
| Community Based Organization | \$11,993,454 | 2.90% | \$28,005,068 | 3.19% | \$16,011,614 | 134% |
| All Other | \$23,297,909 | 5.62% | \$37,994,244 | 4.32% | \$14,696,335 | 63% |
| Home Care [^] | \$0 | 0.00% | \$1,447,839 | 0.16% | \$1,447,839 | 100% |
| PPS PMO | \$179,083,029 | 43.23% | \$339,472,281 | 38.64% | \$160,389,252 | 90% |
| Other* | \$4,558,116 | 1.10% | \$13,381,446 | 1.52% | \$8,823,330 | 194% |
| TOTAL – All Categories | \$414,267,236 | | \$878,498,690 | | \$464,231,454 | 112% |

* Other category includes Partner Type Categories for Uncategorized, Non-PPS Network, County Agency, CBO Tier 3.

[^] Hospital – IP/ED, Hospital – Ambulatory, Case Management, Health Home, and Home Care categories are new following MPA.

PPS Progress on Mid-Point Action Plans – Standard Modification Funds Flow

- For the 14 PPS that received the ‘Standard Modification’ recommendation from PAOP, the overall funding distribution and Non-Hospital/Non-PPS PMO distributions have increased since the Mid-Point Assessment.

| | Cumulative Funds Flow at MPA (DY2, Q2) | Cumulative Funds Flow at DY3, Q1 | Additional Funds Flow since MPA | % Change in Funds Flow |
|---------------------------------------|--|----------------------------------|---------------------------------|------------------------|
| Total Funds Flow | \$264,754,674 | \$558,296,866 | \$293,542,192 | 111% |
| Non-Hospital / Non-PPS PMO Funds Flow | \$71,559,831 | \$168,651,395 | \$97,091,563 | 136% |

- For the categories specifically highlighted in the ‘Standard Modification’ recommendation, PPS Funds Flow distributions increased by over 100%.

| Partner Category | Cumulative Funds Flow at MPA (DY2, Q2) | Cumulative Funds Flow at DY3, Q1 | Additional Funds Flow since MPA | % Change in Funds Flow |
|--|--|----------------------------------|---------------------------------|------------------------|
| Practitioner – Primary Care Provider (PCP) | \$11,703,793 | \$30,358,541 | \$18,654,748 | 159% |
| Mental Health | \$6,735,971 | \$20,610,784 | \$13,874,814 | 206% |
| Substance Abuse | \$2,669,425 | \$7,258,928 | \$4,589,503 | 172% |
| Community Based Organizations | \$4,283,943 | \$10,483,800 | \$6,199,857 | 145% |

PPS Progress on Mid-Point Action Plans – Standard Modification Funds Flow

| | As of MPA (DY2, Q2) | | As of DY3, Q1 | | Changes since MPA | |
|--|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| | Funds Distributed | % of Funds Distributed | Funds Distributed | % of Funds Distributed | Funds Distributed | % of Funds Distributed |
| Practitioner – Primary Care Provider (PCP) | \$11,703,793 | 4.42% | \$30,358,541 | 5.44% | \$18,654,748 | 159% |
| Practitioner – Non-Primary Care Provider (PCP) | \$2,136,190 | 0.81% | \$4,385,137 | 0.79% | \$2,248,947 | 105% |
| Hospital | \$72,126,205 | 27.24% | \$99,983,923 | 17.91% | \$27,857,717 | 39% |
| Hospital – IP/ED [^] | \$0 | 0.00% | \$58,117,421 | 10.41% | \$58,117,421 | 100% |
| Hospital – Ambulatory [^] | \$0 | 0.00% | \$11,792,884 | 2.11% | \$11,792,884 | 100% |
| Clinic | \$17,886,239 | 6.76% | \$44,245,379 | 7.93% | \$26,359,140 | 147% |
| Case Management / Health Home | \$3,462,626 | 1.31% | \$7,015,860 | 1.26% | \$3,553,233 | 103% |
| Case Management [^] | \$0 | 0.00% | \$1,195,140 | 0.21% | \$1,195,140 | 100% |
| Health Home [^] | \$0 | 0.00% | \$622,164 | 0.11% | \$622,164 | 100% |
| Mental Health | \$6,735,971 | 2.54% | \$20,610,784 | 3.69% | \$13,874,814 | 206% |
| Substance Abuse | \$2,669,425 | 1.01% | \$7,258,928 | 1.30% | \$4,589,503 | 172% |
| Nursing Home | \$1,233,657 | 0.47% | \$5,268,488 | 0.94% | \$4,034,832 | 327% |
| Pharmacy | \$277,797 | 0.10% | \$902,312 | 0.16% | \$624,515 | 225% |
| Hospice | \$563,842 | 0.21% | \$1,316,268 | 0.24% | \$752,427 | 133% |
| Community Based Organization | \$4,283,943 | 1.62% | \$10,483,800 | 1.88% | \$6,199,857 | 145% |
| All Other | \$18,748,126 | 7.08% | \$28,633,946 | 5.13% | 9,885,819 | 53% |
| Home Care [^] | \$0 | 0.00% | \$886,400 | 0.16% | \$886,400 | 100% |
| PPS PMO | \$121,068,638 | 45.73% | \$219,751,244 | 39.36% | \$98,682,606 | 82% |
| Other [*] | \$1,858,224 | 0.70% | \$5,468,247 | 0.98% | \$3,610,024 | 194% |
| TOTAL – All Categories | \$264,754,674 | | \$558,296,866 | | \$293,542,192 | 111% |

* Other category includes Partner Type Categories for Uncategorized, Non-PPS Network, County Agency, CBO Tier 3.

[^] Hospital – IP/ED, Hospital – Ambulatory, Case Management, Health Home, and Home Care categories are new following MPA.

PPS Progress on Mid-Point Action Plans – Partner Engagement

- PPS have also made progress in increasing the number of partners engaged across the DSRIP Projects since the Mid-Point Assessment.
 - One PPS saw decreases in the number of engaged partners across multiple categories following the Mid-Point Assessment and has been excluded from these figures to avoid skewing the progress made by the remaining 24 PPS.

| | Partner Commitments at DSRIP Application | Partners Engaged at MPA | Partners Engaged as of DY3, Q1 | Additional Partners Engaged | % Change in Partners Engaged |
|------------------|--|-------------------------|--------------------------------|-----------------------------|------------------------------|
| Partners Engaged | 244,977 | 228,601 | 429,735 | 201,134 | 88% |

- Partner Engagement is defined as the PPS having a direct relationship with a partner as evidenced by a contract or other formal agreement.
 - The contract or formal agreement should identify the services to be provided by the partner on behalf of the PPS and the compensation from the PPS to the partner.
 - Partner compensation may be financial or through the provision of centralized service such as IT or staffing.

PPS Progress on Mid-Point Action Plans – Partner Engagement

| | Committed (in DSRIP project Plan Application) | As of MPA (DY2, Q2) | | As of DY3, Q1 | | Changes since MPA | |
|---------------------------------|---|---------------------|---------------------------------|------------------|---------------------------------|-----------------------------|--------------------------------|
| | | Partners Engaged | % of Committed Partners Engaged | Partners Engaged | % of Committed Partners Engaged | Additional Partners Engaged | % increase in Partners Engaged |
| Practitioner – Primary Care | 53,417 | 37,424 | 70% | 58,841 | 110% | 21,417 | 57% |
| Practitioner – Non-Primary Care | 106,666 | 101,356 | 95% | 198,796 | 186% | 97,440 | 96% |
| Hospital | 254 | 700 | 276% | 964 | 380% | 264 | 38% |
| Clinic | 1,709 | 1,863 | 109% | 2,581 | 151% | 718 | 39% |
| Case Management / Health Home | 1,298 | 1,242 | 96% | 1,977 | 152% | 735 | 59% |
| Mental Health | 9,750 | 9,273 | 95% | 20,838 | 214% | 11,565 | 125% |
| Substance Abuse | 1,235 | 960 | 78% | 1,532 | 124% | 572 | 60% |
| Nursing Home | 860 | 1,104 | 128% | 1,337 | 155% | 233 | 21% |
| Pharmacy | 979 | 324 | 33% | 596 | 61% | 272 | 84% |
| Hospice | 96 | 174 | 181% | 211 | 220% | 37 | 21% |
| Community Based Organization | 2,771 | 2,064 | 74% | 3,192 | 115% | 1,128 | 55% |
| All Other | 65,942 | 72,117 | 109% | 138,870 | 211% | 66,753 | 93% |
| TOTAL – All Partners | 244,977 | 228,601 | 93% | 429,735 | 175% | 201,134 | 88% |

*Note: Count of committed and engaged partners does not reflect an unduplicated count. PPS could commit to and engage the same partner across multiple projects.

PPS Progress on Mid-Point Action Plans – Standard Modification Partner Engagement

- 13 PPS have also made progress in increasing the number of partners engaged across the DSRIP Projects since the Mid-Point Assessment.
 - One PPS saw decreases in the number of engaged partners across multiple categories following the Mid-Point Assessment and has been excluded from these figures to avoid skewing the progress made by the remaining 13 PPS.

| | Partner Commitments at DSRIP Application | Partners Engaged at MPA (DY2, Q2) | Partners Engaged as of DY3, Q1 | Additional Partners Engaged | % Change in Partners Engaged |
|------------------|--|-----------------------------------|--------------------------------|-----------------------------|------------------------------|
| Partners Engaged | 164,201 | 147,858 | 253,206 | 105,348 | 71% |

- For the categories specifically highlighted in the ‘Standard Modification’ recommendation, PPS partner engagement increased for those 13 PPS.

| | Partner Commitments at DSRIP Application | Partners Engaged at MPA (DY2, Q2) | Partners Engaged as of DY3, Q1 | Additional Partners Engaged | % Change in Partners Engaged |
|-------------------------------|--|-----------------------------------|--------------------------------|-----------------------------|------------------------------|
| Practitioner Primary Care | 35,383 | 23,613 | 31,728 | 8,115 | 34% |
| Mental Health | 6,238 | 6,145 | 14,420 | 8,275 | 135% |
| Substance Abuse | 751 | 462 | 763 | 301 | 65% |
| Community Based Organizations | 1,768 | 469 | 639 | 170 | 36% |

PPS Progress on Mid-Point Action Plans – Standard Modification Partner Engagement

| | Committed (in DSRIP project Plan Application) | As of MPA (DY2, Q2) | | As of DY3, Q1 | | Changes since MPA | |
|---------------------------------|---|---------------------|---------------------------------|------------------|---------------------------------|-----------------------------|--------------------------------|
| | | Partners Engaged | % of Committed Partners Engaged | Partners Engaged | % of Committed Partners Engaged | Additional Partners Engaged | % increase in Partners Engaged |
| Practitioner – Primary Care | 35,383 | 23,613 | 67% | 31,728 | 90% | 8,115 | 34% |
| Practitioner – Non-Primary Care | 74,035 | 70,819 | 96% | 116,441 | 157% | 45,622 | 64% |
| Hospital | 150 | 469 | 313% | 556 | 371% | 87 | 19% |
| Clinic | 998 | 1,046 | 105% | 1,428 | 143% | 382 | 37% |
| Case Management / Health Home | 751 | 649 | 86% | 1,027 | 137% | 378 | 58% |
| Mental Health | 6,238 | 6,145 | 99% | 14,420 | 231% | 8,275 | 135% |
| Substance Abuse | 751 | 462 | 62% | 763 | 102% | 301 | 65% |
| Nursing Home | 467 | 692 | 148% | 796 | 170% | 104 | 15% |
| Pharmacy | 849 | 141 | 17% | 245 | 29% | 104 | 74% |
| Hospice | 54 | 113 | 209% | 137 | 254% | 24 | 21% |
| Community Based Organization | 1,768 | 469 | 27% | 639 | 36% | 170 | 36% |
| All Other | 42,757 | 43,240 | 101% | 85,026 | 199% | 41,786 | 97% |
| TOTAL – All Partners | 164,201 | 147,858 | 90.05% | 253,206 | 154% | 105,348 | 71% |

*Note: Count of committed and engaged partners does not reflect an unduplicated count. PPS could commit to and engage the same partner across multiple projects.

Next Steps

Next Steps

- PPS are expected to submit second Mid-Point Action Plan updates to the IA by October 31, 2017.
- The IA will provide updated figures relative to Funds Flow and Partner Engagement progress at the November 16, 2017 PAOP Working Session and MRT Public Comment Day.
 - The presentation will reflect updated Funds Flow and Partner Engagement statistics through the end of DY3, Q2.