



# New York Department of Health Delivery System Reform Incentive Payment (DSRIP) Program

## DSRIP PPS Organizational Application

September 29, 2014



## DSRIP PPS Organizational Application

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## SECTION 1 – EXECUTIVE SUMMARY

### (Pass/Fail with No Scoring)

<b>Scoring Process</b>	Pass/Fail. This section is not factored into the scoring of the PPS application. This response will be reviewed for completeness and a pass/fail determination will be made.
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#### Description

The PPS & Project Plan Application must include an executive summary clearly articulating how the PPS will evolve into a highly effective integrated delivery system. The executive summary should address the following:

- Succinctly explain the identified goals and objectives of the PPS;
- Explain how the PPS has been formulated to meet the needs of the community and address identified healthcare disparities; and
- Provide the vision of what the delivery system will look like after 5 years and how the full PPS system will be sustainable into the future.

<b>Scoring Process</b>	Pass/Fail. This section is not factored into the scoring of the PPS application. This response will be reviewed for completeness and a pass/fail determination will be made.
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<b>PPS Response (Limited to 500 words or less)</b>

#### ~~Certificate of Public Advantage~~

~~Is the PPS applying for a Certificate of Public Advantage (COPA) as part of the application?~~

~~*(Please mark the appropriate box below)*~~

<del>Yes</del>	<del>No</del>

~~If yes, please ensure the PPS completes the COPA application to facilitate the necessary review.~~

#### ~~Accountable Care Organization (ACO)~~

~~Is the PPS applying to become an Accountable Care Organization (ACO) as part of this application?~~

~~*(Please mark the appropriate box below)*~~

<del>Yes</del>	<del>No</del>



~~If yes, please ensure the PPS completes the ACO application to facilitate the necessary review.~~

**Regulatory Relief**

Is the PPS applying for regulatory relief as part of this application?

(Please see *Regulatory Flexibility Guidance for Performing Provider Systems*, available at: [http://www.health.ny.gov/health\\_care/medicaid/redesign/docs/reg\\_flex\\_guidance.pdf](http://www.health.ny.gov/health_care/medicaid/redesign/docs/reg_flex_guidance.pdf)).

***(Please mark the appropriate box below)***

Yes	No

If yes, for each regulation for which a waiver is sought, identify in the response below the following information regarding regulatory relief:

- Identify the regulation that the PPS would like waived (please include specific citation);
- Identify the project or projects in the Project Plan for which a regulatory waiver is being requested and outline the components of the various project(s) that are impacted;
- Set forth the reasons for the waiver request, including a description of how the waiver would facilitate implementation of the identified project and why the regulation might otherwise impede the ability of the PPS to implement such project;
- Identify what, if any, alternatives the PPS considered prior to requesting regulatory relief; and
- Provide information to support why the cited regulatory provision does not pertain to patient safety and why a waiver of the regulation(s) would not risk patient safety; include any conditions that could be imposed to ensure that no such risk exists, which may include submission of policies and procedures designed to mitigate the risk to persons or providers affected by the waiver, training of appropriate staff on the policies and procedures, monitoring of implementation to ensure adherence to the policies and procedures; and evaluation of the effectiveness of the policies and procedures in mitigating risk.

<b>PPS Response</b>

***PPS' should be aware that the agencies may, in their discretion, determine to impose conditions upon the granting of waivers. If these conditions are not satisfied, the State may decline to approve the waiver or, if it has already approved the waiver, may withdraw its approval and require the applicant to maintain compliance with the regulations.***



## SECTION 2 – GOVERNANCE

### (25% of the Overall PPS Structure Score)

<b>Scoring Process</b>	This section <b><i>is worth 25%</i></b> of the total points available for the Overall PPS Structure Score. The responses will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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#### Description

An effective governance model is key to building a well-integrated and high functioning DSRIP PPS network. The PPS must include a detailed description of how the PPS will be governed and how the PPS system will progressively advance from a group of affiliated providers to a high performing integrated delivery system, including contracts with community based organizations. The state strongly encourages that PPS Leads contract with community based organizations. A successful PPS should be able to articulate the concrete steps the organization will implement to formulate a strong and effective governing infrastructure. The governance plan must address how the PPS proposes to address the management of lower performing members within the PPS network. The plan must include progressive sanctions prior to any action to remove a member from the PPS.

#### Governance Organizational Structure

Please provide a narrative that explains the organizational structure of the PPS. In the response, please address the following:

- Outline the organizational structure of the PPS, for example, please indicate whether the PPS has implemented a Collaborative Contracting Model, Delegated Model, Incorporated Model, or any other formal organizational structure that supports a well-integrated and highly functioning network. Explain why the selected organizational structure will be critical to the success of the PPS. In addition, please attach a copy of the organizational chart of the PPS. ***Also, please reference the “Governance How to Guide” prepared by the DSRIP Support Team for helpful guidance on governance structural options the PPS should consider.***
- Specify how the selected governance structure and processes will ensure adequate governance and management of the DSRIP program.
- Specify how the selected governance structure and processes will ensure adequate clinical governance at the PPS level, including establishing quality standards and measurements, clinical care management processes, and the ability to be held accountable for realizing clinical outcomes.
- When applicable, outline how the organizational structure will evolve throughout the years of the DSRIP program period to enable the PPS to become a highly performing organization.

<b>Scoring Process</b>	This response <b><i>is worth 20%</i></b> of the total points available for <i>Section 2 – Governance</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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**PPS Response (Limited to 1500 Words)**



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**Governance Members and Governing Processes**

Describe the governing process of the PPS. In the response, please address the following

- Please outline the members (or the type of members if position is vacant) of the governing body, as well as the roles and responsibilities of each member.
- Please provide a description of the process the PPS implemented to select the members of the governing body.
- Please explain how the members included provide sufficient representation with respect to all of the providers and community organizations included within the PPS network.
- Please outline where coalition partners have been included into the organizational structure [and the PPS Lead strategy to contract with community based organizations](#).
- Describe the decision making/voting process that will be implemented and adhered to by the governing team.
- Explain how conflicts and/or issues will be resolved by the governing team.
- Describe how the PPS governing body will ensure a transparent governing process, such as methodology in which the governing body will transmit the outcomes of meetings.
- Describe how the PPS governing body will engage stakeholders, including Medicaid members, on key and critical topics pertaining to the PPS over the life of the DSRIP program.

<b>Scoring Process</b>	This response <b><i>is worth 30%</i></b> of the total points available for <i>Section 2 – Governance</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1500 Words)</b>

**The Project Advisory Committee (PAC)**

Describe the formation of the project advisory committee of the PPS. In the response, please address the following:

- Describe how the PAC was formed, the timing in which it was formed, along with its membership.
- Outline the role the PAC will serve within the PPS organization.
- [Outline the role of the PAC in the development of the PPS organizational structure, as well as the input the PPS had during the Community Needs Assessment \(CNA\).](#)
- [Please explain how the members included provide sufficient representation with respect to all of the providers and community organizations included within the PPS network.](#)

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 2 – Governance</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

**Compliance**

A PPS must have a compliance plan to ensure proper governance and oversight. Please describe the compliance plan and process the PPS will establish and include in the response the following:

- Identify the designated compliance official or individual (this individual must not be legal counsel to the PPS) and describe the individual’s organizational relationship to the PPS governing team.
- Describe the mechanisms for identifying and addressing compliance problems related to the PPS’ operations and performance.
- Describe the compliance training for all PPS members and coalition partners. Please distinguish those training programs that are under development versus existing programs.
- [Please describe how community members, Medicaid beneficiaries and uninsured community members allocated attributed to the PPS will know how to file a compliance complaint and what is appropriate for such a process.](#)

<b>Scoring Process</b>	This response <b><i>is worth 10%</i></b> of the total points available for <i>Section 2 – Governance</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 250 Words)</b>

**PPS Financial Organizational Structure**

Please provide a narrative on the planned financial structure for the PPS including a description of the financial controls that will be established. This narrative should include, at a minimum:

- Description of the processes that will be implemented to support the financial success of the PPS and the decision making of the PPS’ governance structure.
- Description of the key finance functions to be established within the PPS.
- Identify the planned use of internal and/or external auditors.
- Description of the PPS’ plan to establish a compliance program in accordance with New York State Social [Security Services](#) Law 363-d.

<b>Scoring Process</b>	This response <b><i>is worth 10%</i></b> of the total points available for <i>Section 2 – Governance</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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**PPS Response (Limited to 500 Words)**

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**Oversight and Member Removal**

Please describe the oversight process the PPS will establish and include in the response the following:

- Describe the process in which the PPS will monitor performance.
- Outline on how the PPS will address lower performing members within the PPS network.
- Describe the process for the sanctioning or removing a poor performing member of the PPS network who fails to sufficiently remedy their poor performance. Please ensure the methodology proposed for member removal is consistent and compliant with the standard terms and conditions of the waiver.
- [Indicate how Medicaid beneficiaries and their advocates can provide feedback about providers to inform the member renewal and removal processes.](#)
- [Describe the process for notifying Medicaid beneficiaries and their advocates when providers are removed from the PPS.](#)

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 2 – Governance</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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**PPS Response (Limited to 500 Words)**

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**Domain 1 - Governance Milestones**

Progress towards achieving the project goals and core requirements specified above will be assessed by specific milestones for the DSRIP program, which are measured by particular metrics. Investments in technology, tools, and human resources that will strengthen the ability of the Performing Provider Systems to serve target populations and pursue DSRIP project goals. Domain 1 process milestones and measures will allow DOH to effectively monitor DSRIP program progress and sustainability. The following outlines the milestones that will be required and expected of the PPS to earn DSRIP payments. The milestone is presented for informational purposes only, however, the PPS will be expected to develop a work plan to outline the steps and timeframes in which these milestones will be achieved.

- Implementation plan outlining the PPS’ commitment achieving its proposed governance structure (Due ~~April 1~~March 1, 2015).
- Periodic reports, at a minimum semi-annually and available to PPS members and the community, providing progress updates on PPS and DSRIP governance structure., ~~and a description of how these reports will be shared with PPS members and the community.~~





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- Supporting documentation to validate and verify progress reported on governance, such as copies of PPS bylaws or other policy and procedures documenting the formal development of governance processes or other documentation requested by the Independent Assessor.



## SECTION 3 – COMMUNITY NEEDS ASSESSMENT

### (25% of the Overall PPS Structure Score)

<b>Scoring Process</b>	This section <i>is worth 25%</i> of the total points available for the Overall PPS Structure Score. The responses will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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#### Description

All successful DSRIP projects will be derived from a comprehensive community needs assessment (CNA). Since DSRIP is about system transformation, the structure of a DSRIP CNA will be different from the usual public health format. The CNA should be a comprehensive assessment of the health care resources and community based service resources currently available in the service area and the demographics and health needs of the population to be served. This will lead to the identification of excesses and gaps in services that will need to be corrected in order to transform the system to one that meets the goals of DSRIP. The CNA will be evaluated based upon the PPS’ comprehensive and data-driven understanding of its service delivery system and the community it intends to serve. Please note, the PPS will need to reference in Section 4, DSRIP Projects, how the results of the CNA informed the selection of a particular DSRIP project and how the choice of projects combine to result in the envisioned transformed system. The CNA shall be properly researched and sourced, shall effectively incorporate the stakeholder engagement in its formation, and shall identify current community resources, including community based organizations, as well as existing assets that will be enhanced or eliminated as a result of the PPS’ CNA. ~~Furthermore, the State strongly encourages that PPS Leads contract with community based organizations to ensure that important resources are accessed as part of the DSRIP Program.~~ Lastly, the CNA should include documentation, as necessary, to support the PPS’ community engagement methodology, outreach and decision-making process.

For more information on DOH’s expectations to ensure a successful completion of the CNA, please refer to the document, *Guidance for Conducting Community Needs Assessment required for DSRIP Planning Grants and Final Project Plan Applications*, and the DSRIP Population Health Assessment Webinars, Part 1 and, particularly 2, located on the DSRIP Community Needs Assessment page:

[http://www.health.ny.gov/health\\_care/medicaid/redesign/dsrip\\_community\\_needs\\_assessment.htm](http://www.health.ny.gov/health_care/medicaid/redesign/dsrip_community_needs_assessment.htm)

Health data will be required to further understand the complexity of the health care delivery system and how it is currently functioning. The data collected during the CNA should enable the evaluator to understand how the health care delivery system functions, the community the PPS seeks to serve and the key populations where service gaps are identified. The CNA must include the appropriate data that will support the CNA conclusions that drive the overall PPS strategy. Data provided to support the CNA must be valid, reliable and reproducible. In addition, the data collection methodology presented to conduct this assessment should be done with consideration that future community assessments will be required. DOH has provided a significant amount of relevant data that should inform and be leveraged to complete



the CNA process. This data, in addition to other relevant data sources produced other state agencies, can be found on the DSRIP Performance Data, found here:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/dsrip\\_performance\\_data/](https://www.health.ny.gov/health_care/medicaid/redesign/dsrip_performance_data/).

It is critical that the PPS leverage the data sources available on the DSRIP Performance Data page to ensure the successful completion of the CNA.

**Overview on the Completion of the CNA**

Please describe the completion of the CNA process and include in the response the following:

- Describe the process and methodology in which the CNA was completed.
- Outline the information and data sources that were leveraged to conduct the CNA, specifically citing specific resources that informed the CNA process.

<b>Scoring Process</b>	This response <i><b>is worth 5%</b></i> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

For the following sections, please reference the Guidance document for additional details to ensure completeness.

**Healthcare Provider Infrastructure**

Each PPS should do a complete assessment of the health care resources that are available within its service area, whether they are part of the PPS or not. For each of these providers, there should be an assessment of capacity, service area, Medicaid status, as well as any particular areas of expertise. These resources should include but [are](#) not limited to the following:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• Hospitals;</li> <li>• Ambulatory surgical centers;</li> <li>• Urgent care centers;</li> <li>• Health Homes;</li> <li>• Federally qualified health centers;</li> <li>• Primary care providers including private, clinics, hospital based including residency programs;</li> <li>• Specialty medical providers including private, clinics, hospital based including residency programs;</li> <li>• Dental providers including public and private;</li> </ul> | <ul style="list-style-type: none"> <li>• Rehabilitative services including physical therapy, occupational therapy, and speech therapy, inpatient and community based;</li> <li>• Behavioral health resources including all mental health and substance use disorder treatment providers (including future 1915i providers);</li> <li>• Specialty medical programs such as eating disorders program, autism spectrum early;</li> <li>• Diagnosis/early intervention;</li> <li>• Skilled nursing homes, assisted living facilities;</li> </ul> |
|---|--|



- Home care services;
- Laboratory and radiology services including home care and community access;
- Specialty developmental disability services;
- Specialty services providers such as vision care and DME;
- Pharmacies;
- Local Health Departments;
- Managed care organizations;
- Foster Children Agencies; and
- Area Health Education Centers (AHECs).

Please address the following in the response:

- Describe in an aggregate level the existing healthcare infrastructure and environment, including the number and types of healthcare providers available to the PPS to serve the needs of the community.
- Outline how the composition of the providers needs to be modified to meet the needs of the community.

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 750 Words)</b>

**Community Resources Supporting PPS Approach**

Community based resources take many forms. This wide spectrum will include those that provide basic life needs to fragile populations as well as those specialty services such as educational services for high risk children. There is literature that supports the role of these agencies is-in stabilizing and improving the health of fragile populations. These resources should include but not limited to the following:

- Housing services for the homeless population including advocacy groups as well as housing providers;
- Food banks, community gardens, farmer’s markets;
- Clothing, furniture banks;
- Specialty educational programs for special needs children (children with intellectual or developmental disabilities or behavioral challenges);
- Community outreach agencies;
- Transportation services;
- Religious service organizations;
- Not for profit health and welfare agencies;
- Specialty community-based and clinical services for individuals with intellectual or developmental disabilities;
- Peer and Family Mental Health Advocacy Organizations;
- Self-advocacy and family support organizations and programs for individuals with disabilities;
- Youth development programs;



- Libraries with open access computers;
- Community service organizations;
- Education;
- Local public health programs;
- Local governmental social service programs;
- Community based health education programs including for health professions/students;
- Family Support and training;
- NAMI;
- Individual Employment Support Services;
- Peer Supports (Recovery Coaches);
- Alternatives to Incarceration;
- Ryan White Programs, and
- HIV Prevention/Outreach and Social Service Programs.

Please address the following in the response:

- Describe in an aggregate level the existing community resources, including the number and types of resources available to the PPS to serve the needs of the community.
- Outline how the composition of the community resources ~~are~~ needs to be modified to meet the needs of the community.

<b>Scoring Process</b>	This response <b><i>is worth 10%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

**Community Demographics**

Demographic data is important to understanding the full array of factors contributing to disease and health. Please address the following in the response:

- Provide detailed demographic information, including:
  - Age statistics of the population;
  - Race/ethnicity/language statistics of the population, including identified literacy and health literacy limitations;
  - Income levels;
  - Poverty levels;
  - Disability levels;
  - Education levels; and
  - Employment levels.

Please note, demographic information should also include those who are institutionalized, as well as those involved in the criminal justice system.

***\*As necessary, please include relevant attachments supporting the findings.***



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<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1000 Words)</b>

### Community Population Health & Identified Health Challenges

Please describe the health of the population to be served by the PPS, at a minimum, the PPS should address the following in the response:

- Identify leading causes of death and premature death by demographic groups;
- Leading causes of hospitalization and preventable hospitalizations by demographic groupings;
- Rates of ambulatory care sensitive conditions and rates of risk factors that impact health status;
- Disease prevalence such as diabetes, asthma, cardiovascular disease, depression and other behavioral health conditions, HIV and STDs, etc.;
- Maternal and child health outcomes including infant mortality, low birth weight, high risk pregnancies, birth defects, as well as access and quality of prenatal care; and
- Health risk factors such as obesity, smoking, drinking, drug overdose, physical inactivity, etc.

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1000 Words)</b>

### Healthcare Provider and Community Resources Identified Gaps

Please describe the PPS' capacity compared to community needs, in the response please address the following:

- Identify the health and behavioral health service gaps and/or excess capacity that exists in the community, ***specifically outlining excess hospital and nursing home beds.***
- Include data supporting the causes for the identified gaps, such as the availability, accessibility, affordability, acceptability and quality of health services and what issues may influence utilization of services, such as hours of operation, and transportation that are contributing to the identified needs of the community.
- Identify the strategy and plan to sufficiently address the identified gaps in order to meet the needs of the community. For example, please identify the approach to develop new or expand current resources or alternatively to repurpose existing resources (e.g. bed reduction) to meet the needs of the community.



<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1000 Words)</b>

**Stakeholder & Community Engagement**

It is critically important the PPS strategy be developed through collaboration and discussions to collect input from the community the PPS seeks to serve. Please address the following in regards to stakeholder and community engagement:

- Describe, in detail, the stakeholder and community engagement process undertaken in developing the CNA (public engagement strategy/sessions, use of focus groups, social media, website, and consumer interviews).
- Describe the number and types of focus groups that have been conducted.
- Summarize the key findings, insight, and conclusions that were identified through the stakeholder and community engagement process.

<b>Scoring Process</b>	This response <b><i>is worth 5%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

In the chart below, Please complete the following stakeholder & community engagement exhibit. Please list the organizations engaged in the development of the PPS strategy, a brief description of the organization, and why each organization is important to the PPS strategy.

Organization	Brief Description	Rationale
Org 1		
Org 2		

**Summary of CNA Findings**

In the chart below, please complete the summary of community needs identified, summarizing at a high level the unique needs of the community. Each need should be designated with a unique community need identification number. The needs should be those that the PPS is intending to address through the DSRIP program and projects. Each of the needs outlined below should be appropriately referenced in the DSRIP



project section of the application re-enforcing the rationale for project selection. ***Finally, please attach the CNA report completed by the PPS during the DSRIP design grant phase of the project.***

<b>Scoring Process</b>	This response <b><i>is worth 20%</i></b> of the total points available for <i>Section 3 – Community Needs Assessment</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>Community Need Identification Number</b>	<b>CNA Title</b>	<b>Brief Description</b>	<b>Primary Data Source</b>
CNA 1			
CNA 2			
CNA 3			
CNA 4			

\*Community need identification number will be automatically generated by the online application.





## SECTION 4 – DSRIP PROJECTS

Please see separate attachment for the DSRIP Project Plan and Application sections.



## SECTION 5 – PPS WORKFORCE STRATEGY

### (20% of the Overall PPS Structure Score)

<b>Scoring Process</b>	This section <b><i>is worth 20%</i></b> of the total points available for the Overall PPS Structure Score. The responses will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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#### Description

The overarching DSRIP goal of a 25% reduction in avoidable hospital use (emergency department and admissions) will result in the transformation of the existing health care system - potentially impacting thousands of employees. This system transformation will create significant new and exciting employment opportunities for appropriately prepared workers. PPS plans must identify all impacts on their workforce that are anticipated as a result of the implementation of their chosen projects.

#### Detailed workforce strategy identifying all workplace implications to the PPS

In this section, please describe the anticipated impacts on the workforce the DSRIP program will have and the overall strategy to minimizing the negative impact to the workforce. In the response, please include:

- Summarize how the existing workers will be impacted in terms of possible staff requiring redeployment, retraining, as well as potential reductions to workforce.
- Demonstrate the PPS' understanding on the impact to the workforce by identifying and outlining the specific workforce categories of existing staff (by category: RN, Specialty, case managers, administrative, union, non-union) that will be impacted greatest specifically citing the reasons for the anticipated impact.
- Describe the PPS' high level approach and strategy to minimize the negative impact to the workforce, including: identifying training, re-deployment, recruiting plans and strategies.
- Describe any workforce shortages that exist and may the impact on the PPS' ability to achieve the goals of DSRIP and the selected DSRIP projects.

<b>Scoring Process</b>	This response <b><i>is worth 20%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1000 Words)</b>	

In the table below, please identify the percentage of existing employees will require re-training, percentage of employees that will be redeployed, and the percentage of new employees expected to be hired. It is expected that a specific project may have various levels of impact to the workforce, as a result, the PPS will be ***expected to complete a more comprehensive assessment on the impact to the workforce on a project by project basis*** in the immediate future as a Domain 1 process milestone for payment.



Workforce Implication	Percent of Employees Impacted
Redeploy	20%
Retrain	20%
New Hire	25%

**Analysis of Workforce Impact**

*Retraining of Existing Staff*

Please outline the expected retraining to the workforce, please respond to the following:

- Describe the process by which the identified employees and job functions will be retrained.
- Please indicate whether the retraining will be voluntary.
- Describe the process and potential impact of this retraining approach, particularly in regards to any identified impact to current wages and benefits to existing employees.
- Articulate the ramifications to existing employees who refuse their redeployment assignment.
- Describe the role of labor representatives, [where applicable](#) – intra or inter-entity – in this retraining plan.

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1000 Words)</b>

In the table below, please identify those staff that will be retrained that are expected to achieve partial or full placement. Please identify the percentage of all workers impacted by retraining. Partial placement is defined as those workers that are placed in a new position with at least 75% and less than 95% of previous total compensation. Full placement is defined as those staff with at least 95% of previous total compensation.

Placement Impact	Percent of Retrained Employees Impacted
Full Placement	40%
Partial Placement	20%



*Redeployment of Existing Staff*

Please outline the expected redeployment to the workforce, please respond to the following:

- Describe the process by which the identified employees and job functions will be redeployed.
- Describe the process and potential impact of this redeployment approach, particularly in regards to any identified impact to current wages and benefits to existing employees.
- Articulate the ramifications to existing employees who refuse their redeployment “assignment”.
- Describe the role of labor representatives, [where applicable](#) – intra or inter-entity – in this redeployment plan.

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 1000 Words)</b>

*New Hires*

Please outline the expected additions to the workforce, please respond to the following:

- Briefly describe the new jobs that will be created as a result of the implementation of the DSRIP program and projects.

<b>Scoring Process</b>	This response <b><i>is worth 15%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

In the table below, please itemize the anticipated new jobs that will be created and approximate numbers of new hires per category.

Selections: administrative, physician, mental health providers case managers, social workers, IT staff, nurse practitioners, other	Approximate Number of New Hires



**Workforce Strategy Budget**

In the table below, identify the planned spending the PPS is committing to in its workforce strategy over the term of the waiver. The PPS must outline the total funding the PPS is committing to spend over the life of the waiver.  
In the table below, identify by DSRIP project number the planned spending the PPS is committing to in its workforce strategy over the term of the waiver. The PPS must outline the total funding the PPS is committing to spend over the life of the waiver. The larger the financial commitment to the workforce strategy, relative to the size of the PPS, will have a direct impact on the scoring of this section.

<b>Scoring Process</b>	This response <b><i>is worth 20%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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Funding Type	DY1 Spend	DY2 Spend	DY3 Spend	DY4 Spend	DY5 Spend	Total Spend
Retraining						
Redeployment						
Reduction						
Other						

**State Program Collaboration Efforts**

Describe the PPS workforce strategy and how it may intersect with existing State program efforts, please include the following in the response below:

- As applicable, describe any plans to utilize existing state programs (i.e., Doctors across New York, Physician Loan Repayment, Physician Practice Support, Ambulatory Care Training, Diversity in Medicine, Support of Area Health Education Centers, Primary Care Service Corp, Health Workforce Retraining Initiative, etc.) in the implementation of the Workforce Strategy – specifically in the recruiting, retention or retraining plans.

<b>Scoring Process</b>	This response <b><i>is worth 5%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 250 Words)</b>

**Stakeholder & Worker Engagement**

Describe stakeholder and worker engagement process, please include the following in the response below:

- Outline the steps stakeholder engagement process undertaken in developing the workforce strategy.



- Identify which labor groups or worker representatives, [where applicable](#), have been consulted in the planning and development of the PPS approach.
- Outline how the PPS has and will continue to engage the frontline workers in the planning and implementation of system change.
- Describe the steps the PPS plans to implement to continue stakeholder and worker engagement and any strategies the PPS will implement to overcome the structural barriers that the PPS anticipates to encounter.

<b>Scoring Process</b>	This response <b><i>is worth 10%</i></b> of the total points available for <i>Section 5 – PPS Workforce Strategy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 250 Words)</b>

**Domain 1 Workforce Process Measures**

Progress towards achieving the project goals and core requirements specified above will be assessed by specific milestones for the DSRIP program, which are measured by particular metrics. Investments in technology, tools, and human resources that will strengthen the ability of the Performing Provider Systems to serve target populations and pursue DSRIP project goals. Domain 1 process milestones and measures will allow DOH to effectively monitor DSRIP program progress and sustainability. The following outlines the milestones that will be required and expected of the PPS to earn DSRIP payments. The milestone is presented for informational purposes only, however, the PPS will be expected to develop a work plan to outline the steps and timeframes in which these milestones will be achieved.

- Implementation plan outlining the PPS’ commitment achieving its proposed workforce strategy (Due ~~April 1~~[March 1](#), 2015).
- Periodic reports, at a minimum semi-annually, providing progress updates on PPS workforce strategy.
- Supporting documentation to validate and verify progress reported on the workforce strategy, such as documentation to support the hiring of training and/or recruitment vendor and documentation to support the development of training materials or other documentation requested by the Independent Assessor.



**SECTION 6 – DATA-SHARING, CONFIDENTIALITY & RAPID CYCLE EVALUATION**

**(5% of the Overall PPS Structure Score)**

<b>Scoring Process</b>	This section <i>is worth 5%</i> of the total points available for the Overall PPS Structure Score. The responses will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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**Description**

The PPS plan must include provisions for appropriate data sharing arrangements that drive towards a high performing PPS while appropriately adhering to all federal and state privacy regulations. The PPS plan must include a process for rapid cycle evaluation (RCE) and indicate how it will tie into the state’s requirement to report to DOH and CMS on a rapid cycle basis.

**Data-Sharing & Confidentiality**

PPS plan must have a data-sharing & confidentiality plan that ensures compliance with all Federal and State privacy laws while also identifying opportunities within the law to develop clinical collaborations and data-sharing to improve the quality of care and care coordination. In the response below, please include:

- Provide a description of the PPS’ plan for appropriate data sharing arrangement amongst its partner organizations.
- Explain the strategy describing how all PPS all partners will act in unison to ensure privacy and security of data, including upholding all HIPAA privacy provisions.
- Describe how the PPS will have/develop an ability to share relevant patient information in real-time so as to ensure that patient needs are met and care is provided efficiently and effectively while maintaining patient privacy.

<b>Scoring Process</b>	This response <i>is worth 50%</i> of the total points available for <i>Section 6 – Data Sharing</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

**Rapid-Cycle Evaluation**

As part of the DSRIP Project Plan submission requirements, the PPS must include in its plan, an approach to rapid cycle evaluation (RCE). RCE informs the system in a timely fashion of its progress, how that information will be consumed by the system to drive transformation and who will be accountable for



results, including the organizational structure and process to be overseen and managed.

A description of the PPS' plan for the required rapid cycle evaluation, interpretation and recommendations. In the response, please describe:

- Identify the organizational unit within the PPS organizational structure that will be accountable for reporting results and making recommendations on actions requiring further investigation into PPS performance. Describe the organizational relationship of this unit to the PPS' governing team.
- Outline how will the PPS intends to use collected patient data to:
  - Evaluate performance of PPS partners and providers;
  - Conduct quality assessment and improvement activities; and
  - Conduct population-based activities to improve the health of the targeted population.
- Describe the oversight of the interpretation and application of results (how will this information be shared with the governance team, the providers and other members, as appropriate?)
- Explain how the RCE will assist to facilitate in the successful development of a highly functioning PPS.

<b>Scoring Process</b>	This response <b><i>is worth 50%</i></b> of the total points available for <i>Section 6 – Data Sharing</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>





## SECTION 7 – PPS CULTURAL COMPETENCY/HEALTH LITERACY

### (15% of the Overall PPS Structure Score)

<b>Scoring Process</b>	This section <b>is worth 15%</b> of the total points available for the Overall PPS Structure Score. The responses will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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#### Description

Overall DSRIP and local PPS success hinges on all facets of the PPS achieving cultural competency and improving health literacy. Each PPS must demonstrate cultural competence by successfully engaging Medicaid members from all backgrounds and capabilities in the design and implementation of their health care delivery system transformation. The ability of the PPS to develop solutions to overcome cultural and health literacy challenges is essential in order to successfully address healthcare issues and disparities of the PPS community.

#### Approach to Achieving Cultural Competence

The National Institutes of Health has provided evidence that the concept of cultural competency has a positive effect on patient care delivery by enabling providers to deliver services that are respectful of and responsive to the health beliefs, practices and cultural and linguistic needs of diverse patients. Cultural competency is critical to reducing health disparities and improving access to high-quality health care, health care that is respectful of and responsive to the needs of diverse patients. When developed and implemented as a framework, cultural competence enables systems, agencies, and groups of professionals to function effectively to understand the needs of groups accessing health information and health care—or participating in research—in an inclusive partnership where the provider and the user of the information meet on common ground<sup>1</sup>.

In the response below, please address the following on cultural competence:

- Describe the identified and/or known cultural competency challenges in which the PPS must address to ensure success.
- Describe the strategic plan and ongoing processes the PPS will implement to develop a culturally competent organization and a culturally responsive system of care, particularly addressing how the PPS will engage and train frontline healthcare workers in order to improve patient outcomes due to cultural competency challenges.
- Describe how the PPS will contract with community based organizations toward achieving and maintaining cultural competence throughout the DSRIP Program.

<sup>1</sup> <http://www.nih.gov/clearcommunication/culturalcompetency.htm>



<b>Scoring Process</b>	This response <b><i>is worth 50%</i></b> of the total points available for <i>Section 7 – Cultural Competency &amp; Health Literacy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 250 Words)</b>

**Approach to Improving Health Literacy**

Health literacy is “the degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions”<sup>2</sup>. Individuals must possess the skills to understand information and services and use them to make appropriate decisions about their healthcare needs and priorities. Health literacy incorporates the ability for the patient population to read, comprehend, and analyze information, weigh risks and benefits, and make decisions and take action in regards to their health care. The concept of health literacy extends to the materials, environments, and challenges specifically associated with disease prevention and health promotion.

According to Healthy People 2010, an individual is considered to be "health literate" when he or she possesses the skills to understand information and services and use them to make appropriate decisions about health<sup>3</sup>.

In the response below, please address the following on health literacy:

- Describe the PPS plan to improve and reinforce health literacy of patients served.
- Indicate the initiatives that will be pursued by the PPS to promote health literacy. For example, will the PPS implement health literacy integral to its mission, structure, and operations, has the PPS integrated health literacy into planning, evaluation measures, patient safety, and quality improvement, etc.
- Describe how the PPS will contract with community based organizations toward achieving and maintaining health literacy throughout the DSRIP Program.

<b>Scoring Process</b>	This response <b><i>is worth 50%</i></b> of the total points available for <i>Section 7 – Cultural Competency &amp; Health Literacy</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 250 Words)</b>

<sup>2</sup> <http://www.healthypeople.gov/2010/>

<sup>3</sup> <http://www.healthypeople.gov/2010/>



### **Domain 1 – Cultural Competency/Health Literacy Milestones**

Progress towards achieving the project goals and core requirements specified above will be assessed by specific milestones for the DSRIP program, which are measured by particular metrics. Investments in technology, tools, and human resources that will strengthen the ability of the Performing Provider Systems to serve target populations and pursue DSRIP project goals. Domain 1 process milestones and measures will allow DOH to effectively monitor DSRIP program progress and sustainability. The following outlines the milestones that will be required and expected of the PPS to earn DSRIP payments. The milestone is presented for informational purposes only, however, the PPS will be expected to develop a work plan to outline the steps and timeframes in which these milestones will be achieved.

- Report on the development of training programs surrounding cultural competency and health literacy; and
- Report on and documentation to support the development of policies and procedures which articulate requirements for care consistency and health literacy.



## SECTION 8 – DSRIP BUDGET & FLOW OF FUNDS

### (Pass/Fail with No Scoring)

<b>Scoring Process</b>	Pass/Fail. This section is not factored into the scoring of the PPS application. This response will be reviewed for completeness and a pass/fail determination will be made.
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#### Description

The PPS will be responsible for accepting a single payment from DOH tied to the organization’s ability to achieve the measurable goals of the DSRIP projects. In accepting the performance payments, the PPS must establish a plan to allocate the DSRIP funding amongst the participating providers in the PPS. In the response below, please address the following on DSRIP budget and flow of funds:

- Describe the plan in which the PPS plans on distributing DSRIP funds.
- Describe, on a high level, ~~on~~ how the PPS plans to distribute funds among the clinical specialties, such as primary care vs. specialties; ~~and,~~ among all applicable organizations along the care continuum, such as SNFs, LTACs, ~~and~~ Home Care, ~~to community based organizations, and other safety-net providers, including adult care facilities (ACFs), assisted living programs (ALPs), licensed home care services agencies (LHCSAs), and adult day health care (ADHC) programs.~~
- Outline how the distribution of funds is consistent and/or ties to the governance structure.
- Describe how the proposed approach will best allow the PPS to achieve its DSRIP goals.

<b>Scoring Process</b>	Pass/Fail. This section is not factored into the scoring of the PPS application. This response will be evaluated for completeness and a pass/fail determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>
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To summarize the methodology, please identify the percentage of payments PPS intends to distribute amongst defined funding distribution categories. Funding distribution categories must include (but are not limited to):

1. **Cost of Project Implementation:** the PPS should consider all costs to be incurred by the PPS, such as salary and benefits, contractor costs, materials and supplies, and its participating providers in implementing the DSRIP Project Plan.
2. **Revenue Loss:** the PPS should consider the revenue lost by participating providers in implementing the DSRIP Project Plan through changes such as a reduction in bed capacity, closure of a clinic site, or other significant changes in existing business models. In addition, funding can be distributed based upon providing the necessary funding to sustain the safety net.



**3. Internal PPS Provider Bonus Payments:** the PPS should consider the impact of individual providers in the PPS meeting and exceeding the goal of the PPS' DSRIP Project Plan.

Please complete the following chart to illustrate the PPS' proposed approach for allocating performance payments. [Please note, the percentages requested represent aggregated estimated percentages over the five-year DSRIP period; are subject to change under PPS governance procedures; and are based on the maximum funding amount.](#)

Budget Category	Percentage (%)
Cost of Project Implementation	
Revenue Loss	
Internal PPS Provider Bonus Payments	
Other (Please Define)	
<b>Total</b>	<b>MUST EQUAL 100%</b>

#### Domain 1 – Project Budget & DSRIP Flow of Funds Milestones

Progress towards achieving the project goals and core requirements specified above will be assessed by specific milestones for the DSRIP program, which are measured by particular metrics. Investments in technology, tools, and human resources that will strengthen the ability of the Performing Provider Systems to serve target populations and pursue DSRIP project goals. Domain 1 process milestones and measures will allow DOH to effectively monitor DSRIP program progress and sustainability. The following outlines the milestones that will be required and expected of the PPS to earn DSRIP payments. The milestone is presented for informational purposes only, however, the PPS will be expected to develop a work plan to outline the steps and timeframes in which these milestones will be achieved.

- Quarterly or more frequent reports on the distribution of DSRIP payments by provider and project and the basis for the funding distribution to be determined by the Independent Assessor.



## SECTION 9 – FINANCIAL SUSTAINABILITY PLAN

### (10% of the Overall PPS Structure Score)

<b>Scoring Process</b>	This section <i>is worth 10%</i> of the total points available for the Overall PPS Structure Score. The responses will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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#### Description

The continuing success of the PPS' DSRIP Project Plan will require not only successful service delivery integration, but the establishment of an organizational structure that supports the PPS' DSRIP goals. One of the key components of that organizational structure is the ability to implement financial and operational strategies that will ensure the financial sustainability of the PPS as a whole. Each PPS will have the ability to establish the financial practices that best meet the needs, structure, and composition of their respective PPS. In this section of the DSRIP Project Plan the PPS must illustrate its plan for implementing an operating model that will support the financial sustainability of the PPS throughout the five year DSRIP demonstration period and beyond.

#### Assessment of PPS Financial Landscape

- It is critical for the PPS to understand the overall financial health of the PPS. The PPS will need to understand the providers within the network that are financially fragile and whose financial future could be further impacted by the goals and objectives of DSRIP projects. In the narrative, please address the following: describe the assessment the PPS has performed to identify the PPS partners that are currently financially challenged and are at risk for financial failure.
- Identify at a high level the expected financial impact DSRIP projects will have on financially fragile providers and/or other providers that could potentially negatively impacted by the goals of DSRIP.

<b>Scoring Process</b>	This response <i>is worth 33.33%</i> of the total points available for <i>Section 9 – Financial Sustainability Plan</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 750 Words)</b>

#### Path to PPS Financial Sustainability

The PPS must develop a strategic plan to achieve financial sustainability, so as to ensure all Medicaid members attributed to the PPS have access to the full ranges of necessary services. In the narrative, please address the following:

- Describe the plan the PPS has or will develop, outlining the PPS' path to financial sustainability, citing any known financial restructuring efforts that will require completion.



- Describe how the PPS will monitor the financial sustainability of each PPS partner and ensure those fragile safety net providers, essential to achieving the PPS' DSRIP goals, will achieve a path of financial sustainability.
- Describe how the PPS will sustain the DSRIP outcomes after the conclusion of the program.

<b>Scoring Process</b>	This response <b><i>is worth 33.33%</i></b> of the total points available for <i>Section 9 – Financial Sustainability Plan</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

**Strategy to Pursue and Implement Payment Transformation to Support Financial Sustainability**

Please describe the PPS’ plan for engaging in payment reform over the course of the five year demonstration period. This narrative should include:

- Articulate the PPS’ vision for transforming to value based reimbursement methodologies and how the PPS plans to engage Medicaid managed care organizations in this process.
- Outline how payment transformation will assist the PPS to achieve a path of financial stability, particularly for financially fragile safety net providers.

<b>Scoring Process</b>	This response <b><i>is worth 33.33%</i></b> of the total points available for <i>Section 9 – Financial Sustainability Plan</i> . The response will be evaluated for completeness and a scoring determination will be made based upon the quality of the response.
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<b>PPS Response (Limited to 500 Words)</b>

**Domain 1 – Financial Sustainability Plan Milestones**

Progress towards achieving the project goals and core requirements specified above will be assessed by specific milestones for the DSRIP program, which are measured by particular metrics. Investments in technology, tools, and human resources that will strengthen the ability of the Performing Provider Systems to serve target populations and pursue DSRIP project goals. Domain 1 process milestones and measures will allow DOH to effectively monitor DSRIP program progress and sustainability. The following outlines the milestones that will be required and expected of the PPS to earn DSRIP payments. The milestone is presented for informational purposes only, however, the PPS will be expected to develop a work plan to outline the steps and timeframes in which these milestones will be achieved.

- Completion of detailed implementation plan on the PPS’ financial sustainability strategy (due ~~April 1~~ March 1<sup>st</sup>, 2015); and
- Quarterly reports on and documentation to support the development and successful implementation of the financial sustainability plan.



## SECTION 10 – BONUS POINTS

### Proven Population Health Management Capabilities (applicable to Project 2.a.i. only)

Population health management skill sets and capabilities will be a critical function of the PPS lead to successfully develop an integrated delivery system. If applicable, please outline the experience and proven population health management capabilities of the PPS Lead, particularly with the Medicaid population. Alternatively, please explain how the PPS has engaged key partners that possess proven population health management skill sets.

<b>Scoring Process</b>	If the response can effectively demonstrate the PPS Lead or partners has proven population health management capabilities, particularly with the Medicaid population, the PPS will be awarded <b>3 additional bonus points</b> to the 2.a.i. project application score.
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<b>PPS Response (Limited to 250 words)</b>

### Proven Workforce Strategy Vendor

Minimizing the negative impact to the workforce to the greatest extent possible is an important DSRIP goal. If applicable, please outline whether the PPS has or intends to contract with a proven and experienced entity to help carry out the PPS' workforce strategy of retraining, redeploying, and recruiting employees. Particular importance is placed on those entities that can demonstrate experience successfully retraining and redeploying healthcare workers due to restructuring changes.

<b>Scoring Process</b>	If the response can effectively demonstrate the PPS Lead contracted with a proven and independent organization to assist the workforce strategy the PPS will be awarded <b>3 additional bonus points</b> to each project application score.
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<b>PPS Response (Limited to 250 words)</b>

### Selection of 11<sup>th</sup> Project (2.d.i. Implementation of Patient Activation Activities to Engage, Educate, and Integrate the Uninsured and Low/Non Utilizing Medicaid Populations into Community Based Care)

As previously articulated by DOH, the bonus points will be attributed to those PPSs that have elected to pursue the 11<sup>th</sup> project.

<b>Scoring Process</b>	Those PPSs that have elected will be awarded <b>additional bonus points</b> to each project application score.
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**New York Department of Health**  
Delivery System Reform Incentive Payment (DSRIP) Program  
DSRIP PPS Organizational Application

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***Please indicate whether the PPS has elected to pursue the 11<sup>th</sup> project by marking the appropriate box below.***

Yes	No



## SECTION 11 – ATTESTATION

The lead applicant of the Performing Provider System [PPS] must sign this attestation form in order for the project application to be valid.

Check the following:

I hereby attest as the lead applicant of this PPS that all information provided on this Project Plan Applicant is true and accurate to the best of my knowledge.

Lead Provider Name: \_\_\_\_\_

Name of Authorized Officer: \_\_\_\_\_

Date: \_\_\_\_\_