



**Department
of Health**

Webinar Questions and Answers:

Speed and Scale and Reopening of the
Performance Network

October 2015

health.ny.gov

Q: Will the slides and recording from this webinar be made public?

A: Yes, the recording will be posted on the DSRIP Digital Library and the hard copy of the slides will be posted on the DOH website.

Q: When will the PPSs receive the performance network lists?

A: The PPSs can extract their performance network list from MAPP at any time.

Q: Will DOH/IA/CMA go through and update the MAPP IPP tool where provider scale and speed commitments have already been entered? Or will a PPS be required to resubmit their provider rollout?

A: MAPP IPP will reflect the revised provider Scale commitments as of the January Quarterly Report.

Q: Once we submit our linkage of specific providers to specific milestone provider commitments in January, how will we adjust that alignment as providers join and leave our network?

A: Come January 2016, MAPP IPP will feature multiple integration points with the Network Tool. One functionality will be to identify providers participating in each project, which PPS will have the opportunity to revise with each report. At the point of completion of a project requirement, PPS will then associate a subset of these providers participating in the project as those having implemented said completed milestone - this list will then not be adjustable after each respective report is submitted.

Q: Can DOH shift the network opening period to start after October 31st? This is a significant lift while we're doing our DY1Q2 reporting?

A: The DOH has taken this into consideration and extended the network reopening period by 2 weeks into November.

Q: What happens if we upload a duplicate provider (by mistake) via the new provider template?

A: The template will be QA'd by the DOH before being uploaded into the MAPP tool to mitigate duplicative additions.

Q: How will new hires NPI's be accounted for in the network? These obviously need to be submitted.

A: Any new additional NPIs can be added during the network reopening period.

Q: Will there be PPS user-testing for the provider-project participation MAPP interface? This seems like a very manual, very time-consuming process that would benefit from PPS input. .

A: This is something that the DOH will consider.

Q: What about providers that fall into multiple provider types?

A: Providers will be displayed within each provider type they fall into based on the revised categorization logic.

Q: Does this account for individual providers that work for multiple organizations?

A: All providers have maintained the association with each PPS network as per prior to this recategorization effort.

Q: How will the DOH handle a single NPI that represents multiple clinic sites? For example, if a single NPI is used for four physically separate BH outpatient clinics, would a PPS be able to have that submitted as four providers?

A: No, they cannot submit clinics that roll up to a single NPI as multiple providers. In the DSRIP program, 1 NPI = 1 Provider.

Q: How do these revisions effect our DY1 Q2 reports?

A: As covered in the webinar, references to provider Scale commitments and reporting have been removed from within the DY1 Q2 October Quarterly Report.

Q: You previously said that PPS could not remove a provider, how does this calculate in?

A: As previously communicated, providers will not be able to remove providers from their networks at this time.

Q: How will we know what new providers are categorized as when we add them in October?

A: The unaffiliated provider list, which is stored on the DSRIP Digital Library, will be inclusive of DSRIP provider categorizations.

Q: Why aren't all of our projects listed in the "Committed Targets" tab?

A: All projects associated with original commitments from the January application should be displayed in the "Committed Targets" tab. Those projects not affected by the change in provider categorization were left unchanged and not included.

Q: Will all of these revisions be automatically calculated for PPSs?

A: MAPP IPP will reflect the revised provider Scale commitments as of the January Quarterly Report.

Q: Can NPI numbers be included in the unaffiliated provider list?

A: Yes, NPI will be included in the unaffiliated provider list.

Q: Can new providers added from the unaffiliated provider list be counted towards provider speed and scale commitments?

A: Only providers falling into one of the DSRIP categories can be applied to provider Scale commitments according to whichever categories apply to the respective project.

Q: For the new provider template, how does this apply to providers who are currently in the PPS, but have new hires and their NPIs aren't accounted for yet?

A: Any new additional NPIs can be added during the network reopening period.

Q: Does patient engagement Speed & Scale numbers still have to be reported in DY1Q2?

A: Yes, patient engagement speed and scale expectations and reporting has not been impacted by the exercise.

Q: Is the selection of providers we will be reporting on a project level or by milestone/unit level (example IDS all PCPs in IDS or all PCPs involved in PCMH) in the January reports?

A: Come January 2016, MAPP IPP will feature multiple integration points with the Network Tool. One functionality will be to identify providers participating in each project, which PPS will have the opportunity to revise with each report. At the point of completion of a project requirement, PPS will then associate a subset of these providers participating in the project as those having implemented said completed milestone - this list will then not be adjustable after each respective report is submitted.

Q: When you refer to the "old" provider list, do you mean the list(s) that were released on or around January 7th?

A: Yes, the old provider Scale commitments and old network refers to the information provided and subsequently submitted with the January Project Plan Application.

Q: How do the SN Non-SN providers relate to PAM deliverables?

A: It is up to the discretion of the PPS to decide which providers, Safety Net or otherwise, will administer the PAM surveys

Q: Can you show the slide once more with the ratio calculation for decreased provider type?

A: The webinar is currently housed on the DSRIP Digital Library under the webinars and presentations section.

Q: When will you release the logic / algorithms you used to identify provider categories?

A: Definition of provider categories were included in the speed and scale count table cover tab.

Q: Since PCMH recognition occurs at the group/location level, will there be a crosswalk or roll-up of individual providers?

A: The PPS received a crosswalk with their speed and scale files that crosswalk an Entity ID to the multiple NPI/MMIS providers that roll up to the Entity ID.

Q: Is there a template for the attestation that the providers have to sign?

A: A DOH standard template is not stored on the DSRIP website. PPS lead partners are responsible for maintaining their own file of signed partnership agreements from all partner organizations that can be made available to the state and/or CMS upon request.

Q: Will there be a corresponding opportunity for those partners to appeal a non-safety net designation?

A: There may be a safety-net designation period in the future. The DOH will notify the PPS once this period begins.

Q: Please detail the attestation process more if we are re-classifying providers or if we add providers that are part of larger organizations that have already given the PPS an attestation back in January 2015.

A: A provider, who already has an attestation letter with a PPS, will not be required to submit a new letter of attestation based on the revised classification. No letters of attestation are required for providers that are part of a larger organization in cases where the larger organization has the express legal authority to commit on behalf of the providers.