



**Department
of Health**

**Medicaid
Redesign Team**

DSRIP Update: DSRIP Performance Dashboards

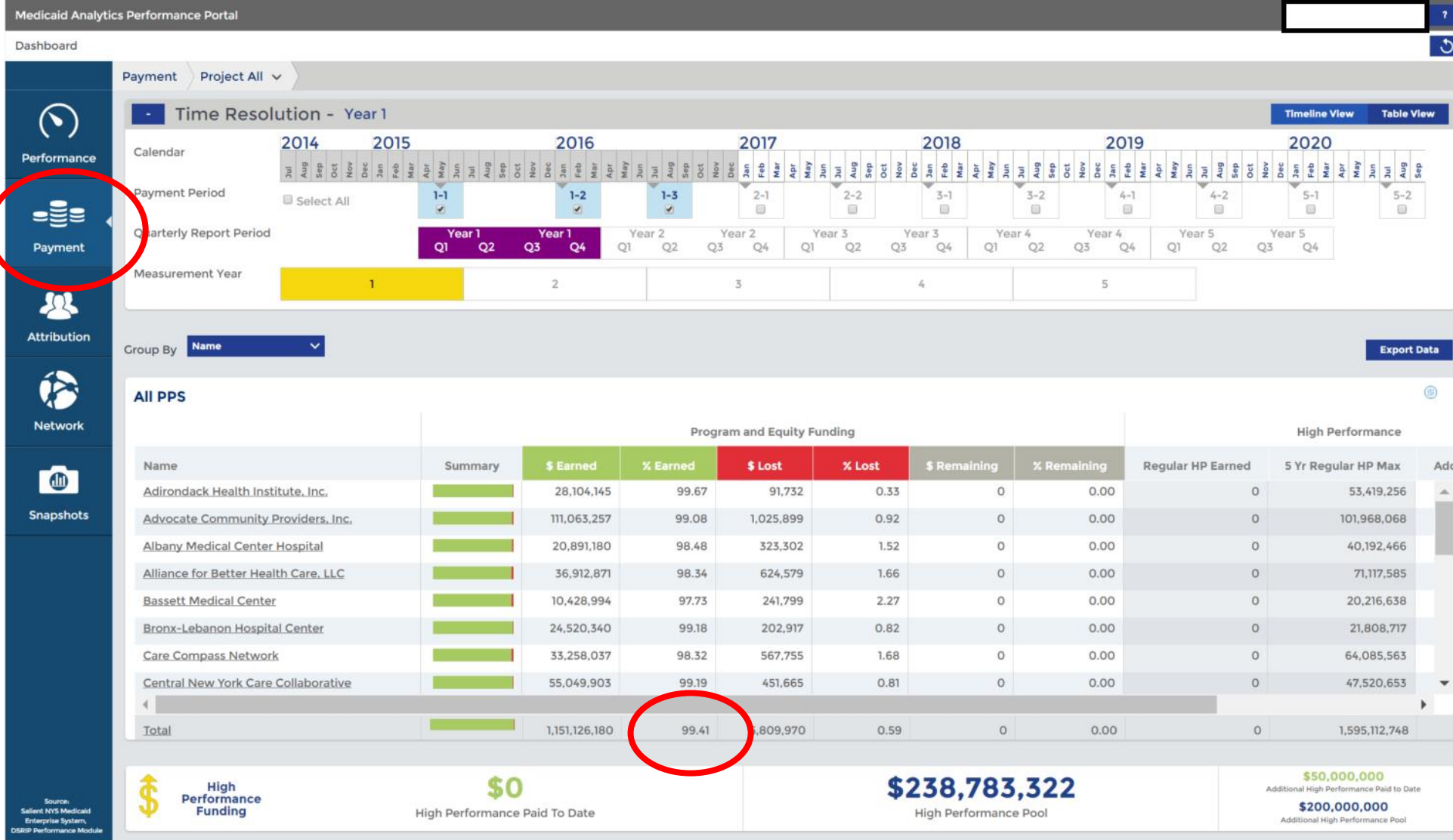
Greg Allen, MSW

Director, OHIP Division of Program Development and Management

John Amisano, MPH

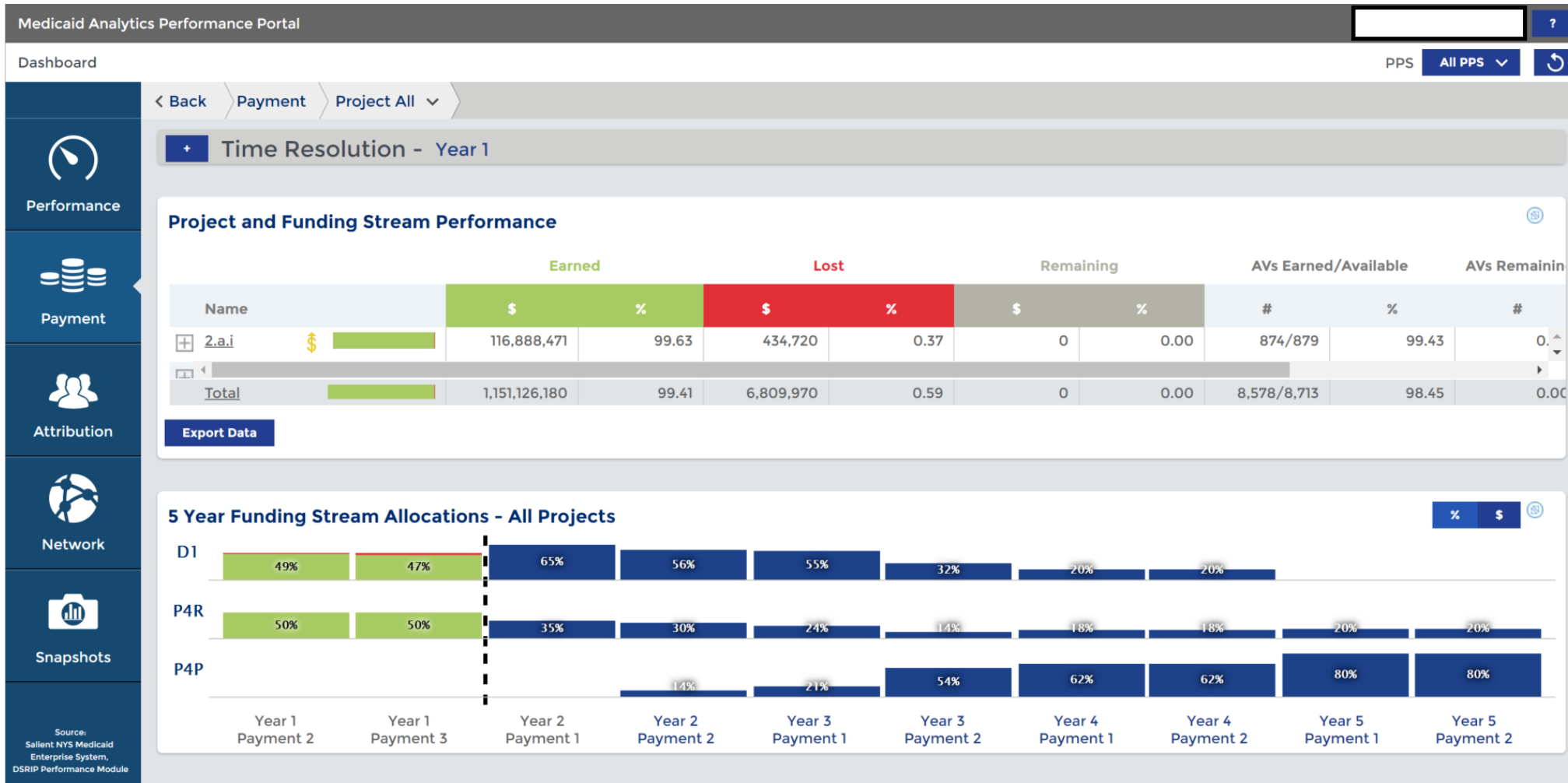
Principal Consultant, Salient HHS

DSRIP Dollars Earned to Date

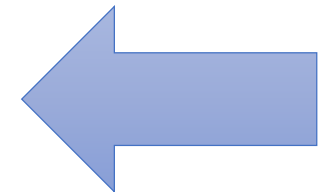


Nearly all (99.41%) of potential Program & Equity Funding dollars have been earned to date.

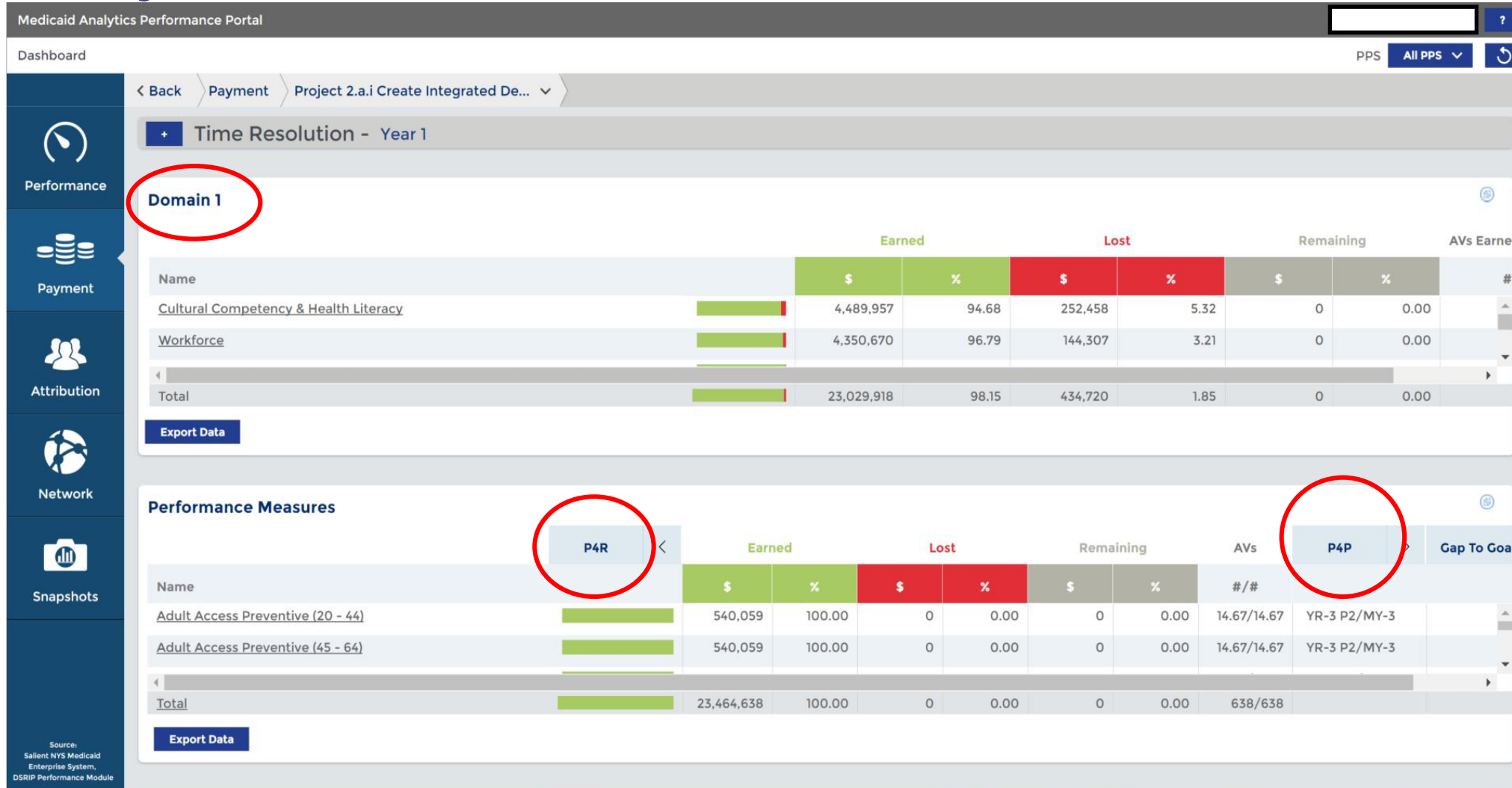
Funding Streams



As funding for Domain 1 and Pay-for-Reporting decrease, funding for Pay-for-Performance increases.



Project 2ai Performance



Funding stream view:

- a) Domain 1 process milestones/ speed & scale
- b) Pay for Reporting (P4R)
- c) Pay for Performance (P4P)

Project 2ai Pay for Reporting

Medicaid Analytics Performance Portal

Dashboard

PPS All PPS

Performance Measures

Name	P4R	Earned		Lost		Remaining		AVs #/#	P4P	Gap To Goal
		\$	%	\$	%	\$	%			
Adult Access Preventive (20 - 44)		540,059	100.00	0	0.00	0	0.00	14.67/14.67	YR-3 P2/MY-3	
Adult Access Preventive (45 - 64)		540,059	100.00	0	0.00	0	0.00	14.67/14.67	YR-3 P2/MY-3	
Adult Access Preventive (65 and Older)		540,059	100.00	0	0.00	0	0.00	14.67/14.67	YR-3 P2/MY-3	
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers		1,620,177	100.00	0	0.00	0	0.00	44/44	YR-3 P2/MY-3	
Child Access - Primary Care (12 to 19)		405,044	100.00	0	0.00	0	0.00	11/11	YR-3 P2/MY-3	
Child Access - Primary Care (12 to 24 Months)		405,044	100.00	0	0.00	0	0.00	11/11	YR-3 P2/MY-3	
Child Access - Primary Care (25 Months to 6)		405,044	100.00	0	0.00	0	0.00	11/11	YR-3 P2/MY-3	
Child Access - Primary Care (7 to 11)		405,044	100.00	0	0.00	0	0.00	11/11	YR-3 P2/MY-3	
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)		810,089	100.00	0	0.00	0	0.00	22/22	YR-3 P2/MY-3	
H-CAHPS - Care Transition Metrics (Q23, 24, and 25)		1,620,177	100.00	0	0.00	0	0.00	44/44	YR-3 P2/MY-3	
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)		810,089	100.00	0	0.00	0	0.00	22/22	YR-3 P2/MY-3	
Medicaid Spending on ER and Inpatient Services +/-		1,620,177	100.00	0	0.00	0	0.00	44/44	YR-3 P2/MY-3	
Medicaid spending on Primary Care and community based behavioral health care		1,620,177	100.00	0	0.00	0	0.00	44/44	YR-3 P2/MY-3	
PPS - PPS		1,620,177	100.00	0	0.00	0	0.00	44/44	YR-3 P2/MY-3	
Total		23,464,638	100.00	0	0.00	0	0.00	638/638		

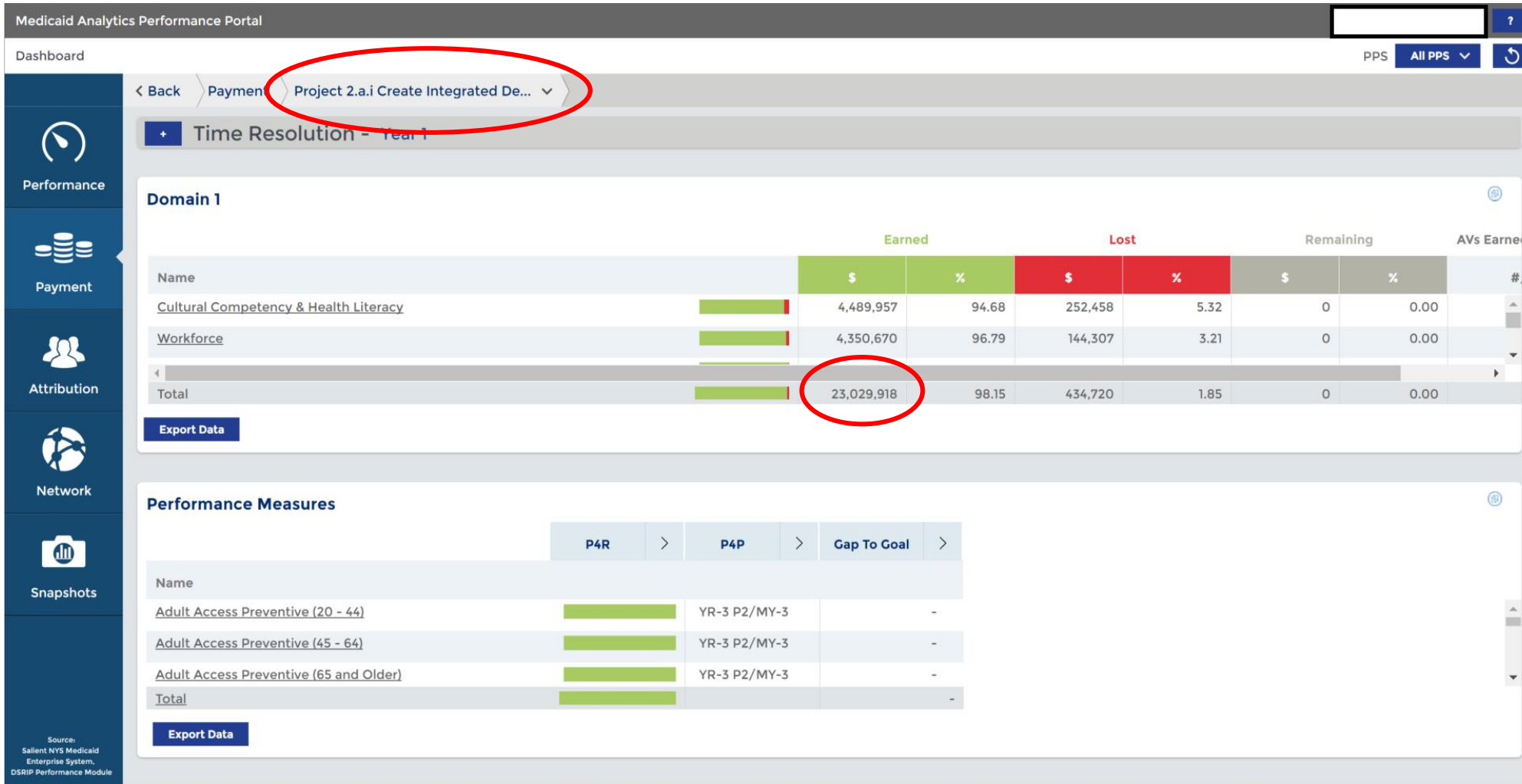
Export Data

Source: Salient NYS Medicaid Enterprise System, DSRIIP Performance Module

100% of funding received for Pay for Reporting.

Pay for Performance is based on MY3 – which we are more than 1/2 way through.

Project 2ai Integrated Delivery Systems



Significant funding is available for creating integrated delivery systems (Project 2ai) with more than \$23 million earned to date for Domain 1.

Project 2ai Domain 1

Medicaid Analytics Performance Portal

Dashboard PPS All PPS

Back Payment Project 2.a.i Create Integrated De...

Domain 1

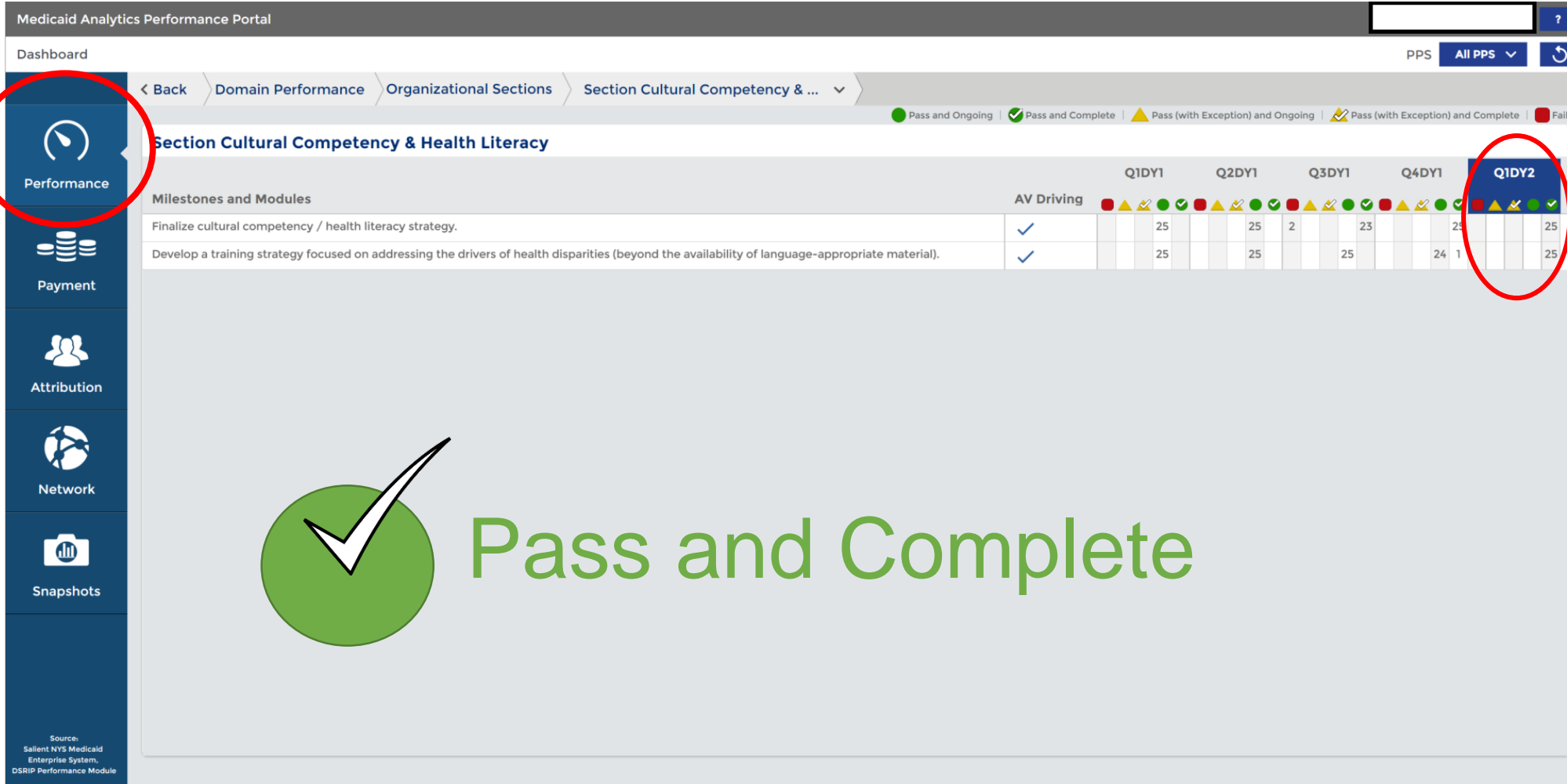
Name	Earned		Lost		Remaining		AVs Earned
	\$	%	\$	%	\$	%	
Cultural Competency & Health Literacy	4,489,957	94.68	252,458	5.32	0	0.00	
Workforce	4,350,670	96.79	144,307	3.21	0	0.00	
Governance	4,704,460	99.20	37,955	0.80	0	0.00	
Financial Stability	4,742,415	100.00	0	0.00	0	0.00	
Quarterly Progress Reports / Budget / Flow of Funds Project Process Measures	4,742,415	100.00	0	0.00	0	0.00	
Total	23,029,918	98.15	434,720	1.85	0	0.00	

Export Data

Source: Salient NYS Medicaid Enterprise System, OSRIP Performance Module

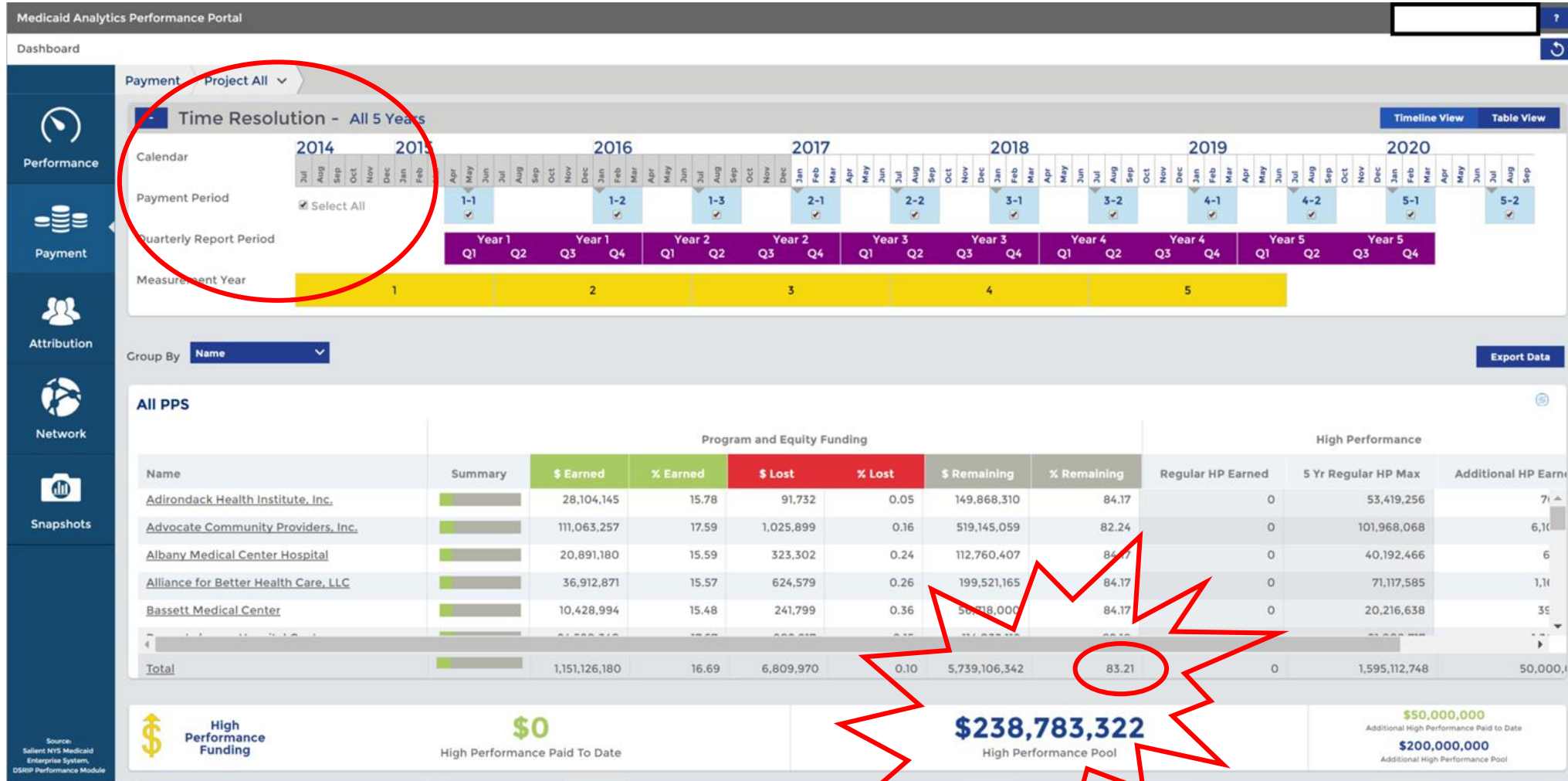
Domain 1, funding was lost in the Cultural Competency/ Health Literacy, Workforce and Governance work streams.

Project 2ai Details on Cultural Competency



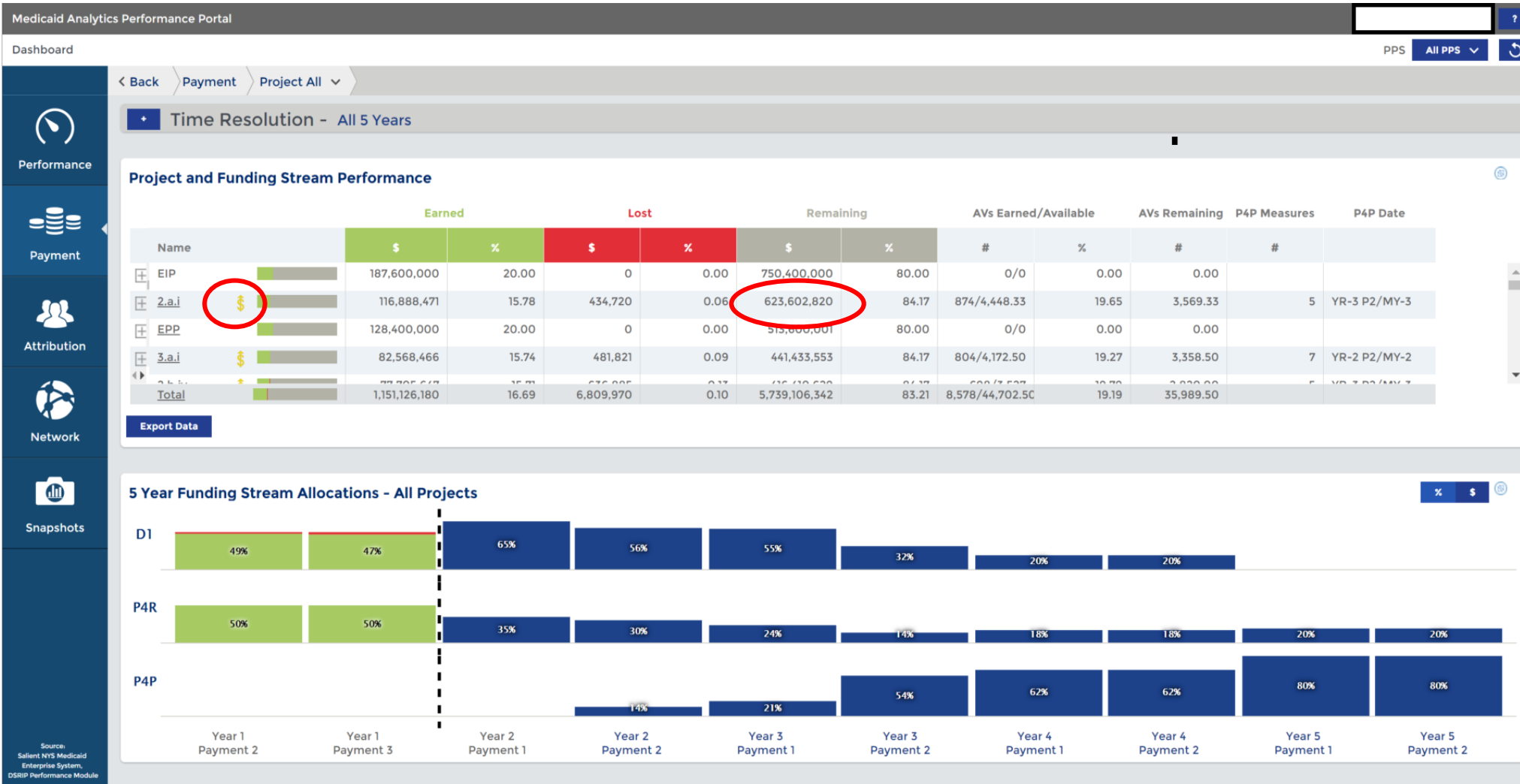
Two PPS missed milestones in DY1 Q3 however by DY2 Q2 all 25 PPS (100%) have “passed and completed” this work stream for Project 2ai.

DSRIP Funding Still Available



Focusing on all payment periods: 83% of DSRIP program funding & 100% of high performance payments are still available.

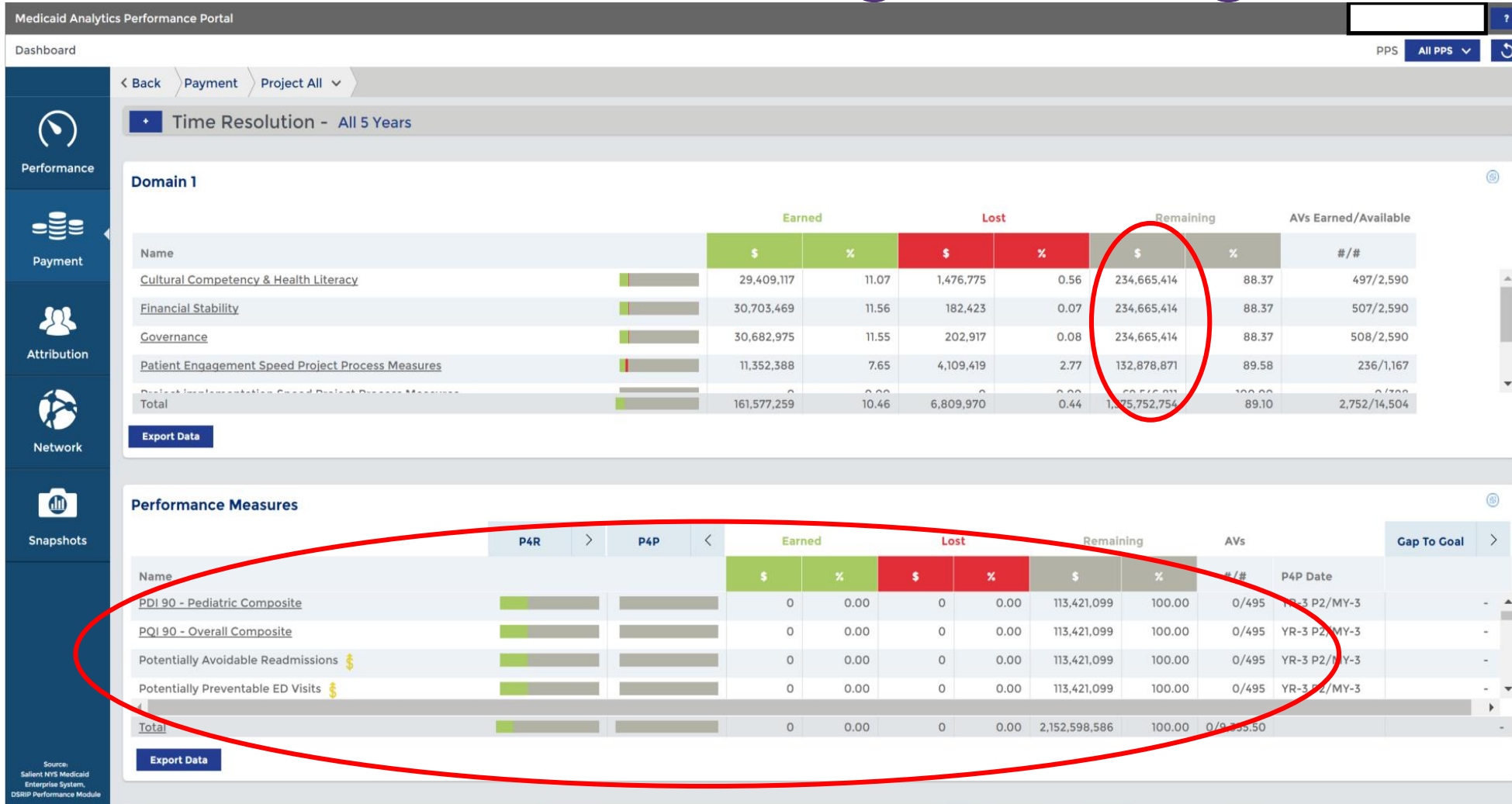
Program Funding Remaining



Project 2ai has more than \$ 623 million still available; second only to the Equity Program.

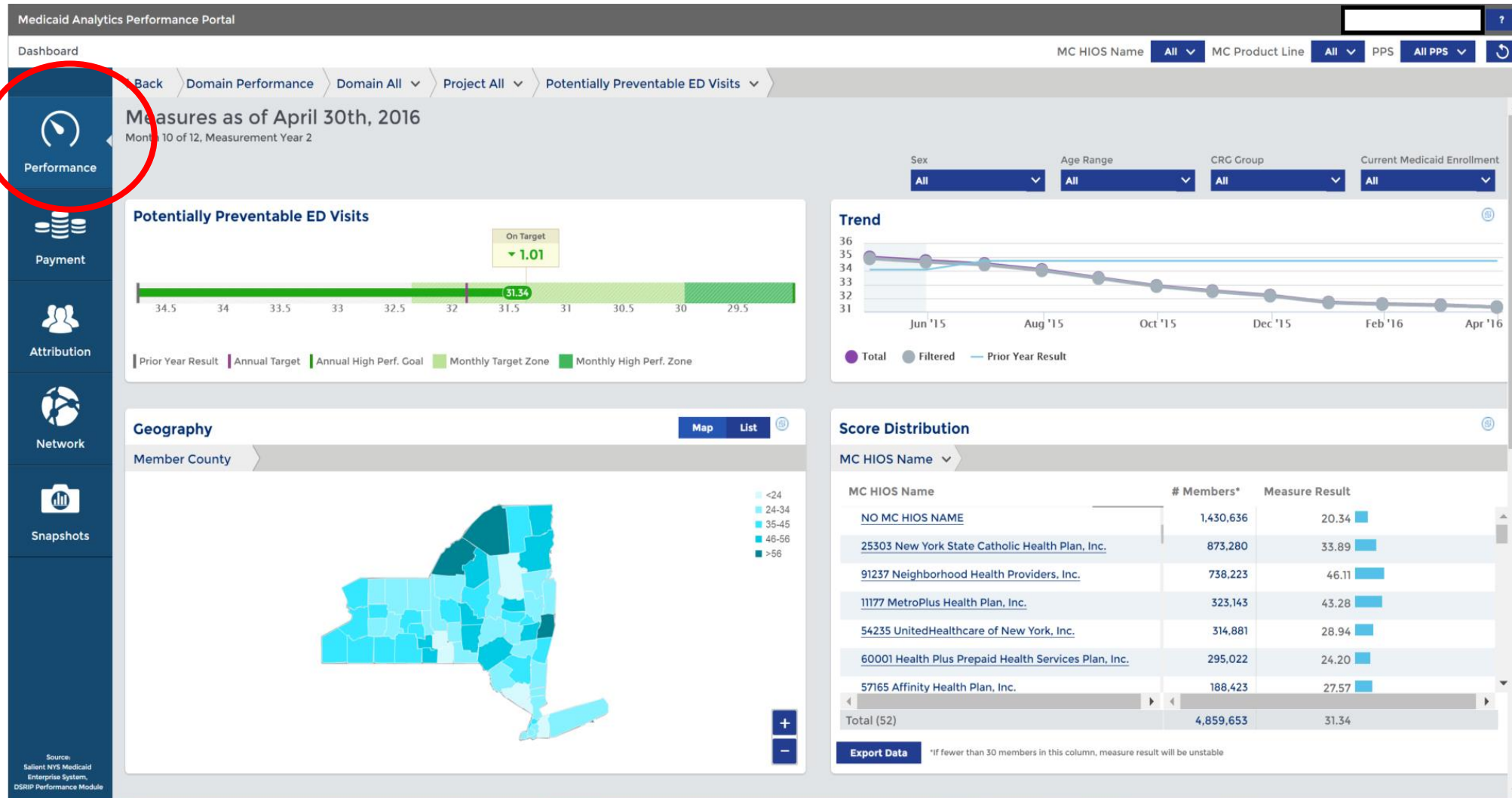
There is potential to earn more with High Performance funding as well.

Sources of Remaining Funding



In Domain 1, the most dollars remaining are for Cultural Competency, Financial Stability & Governance work streams, as well as the system transformation measures – including PPRs and PPVs.

Statewide View of PPVs



Statewide, the trend of Potentially Preventable ED Visit rates are decreasing markedly.

Analysis can be done by county/zip code, as well as score distribution by MCO, PPS, PCP.

Potentially Preventable ED Visits

Potentially Avoidable Emergency Room Visits per 100 Members
Numerator: Number of preventable emergency visits as defined by revenue and CPT codes
Denominator: Number of people (excludes those born during the measurement year) as of the last day of the measurement year

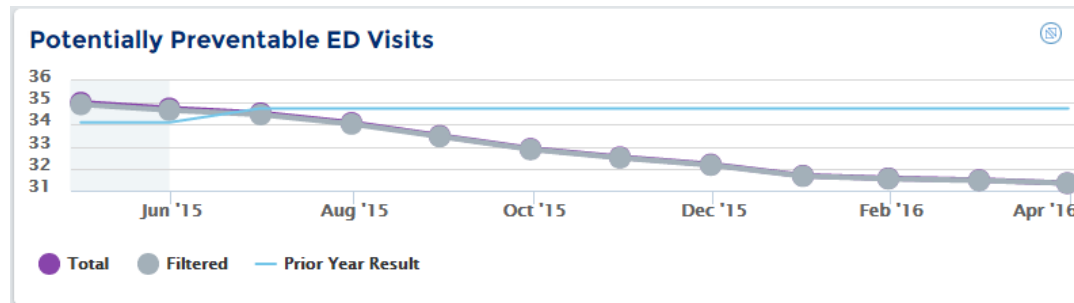


Statewide Potentially Preventable ED Visits are declining.

**Baseline was 34.74
Annual Target is 31.87
April, 2016 result was 31.34; 18% over target**

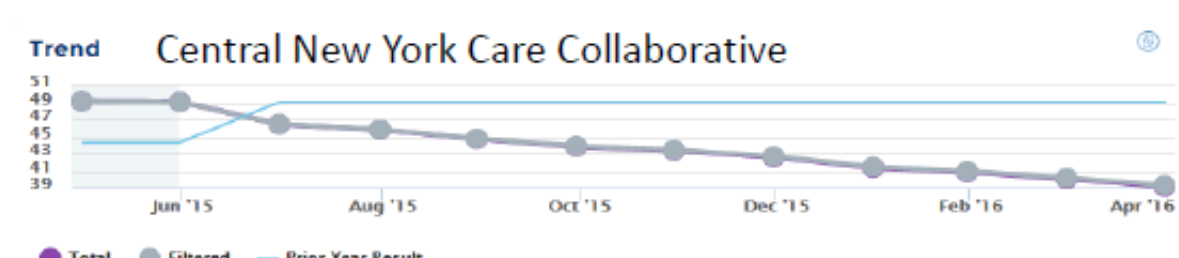
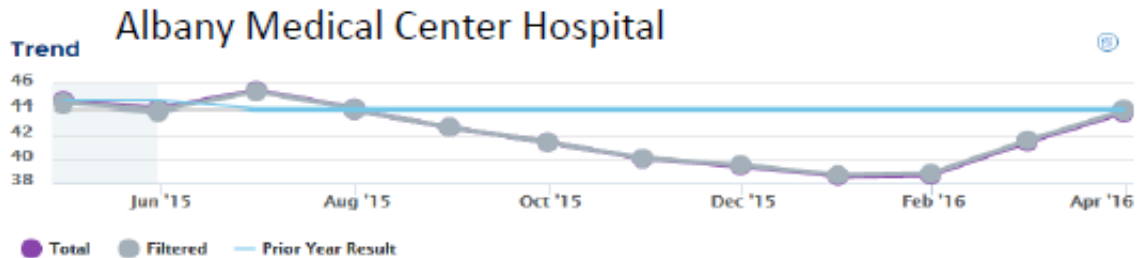
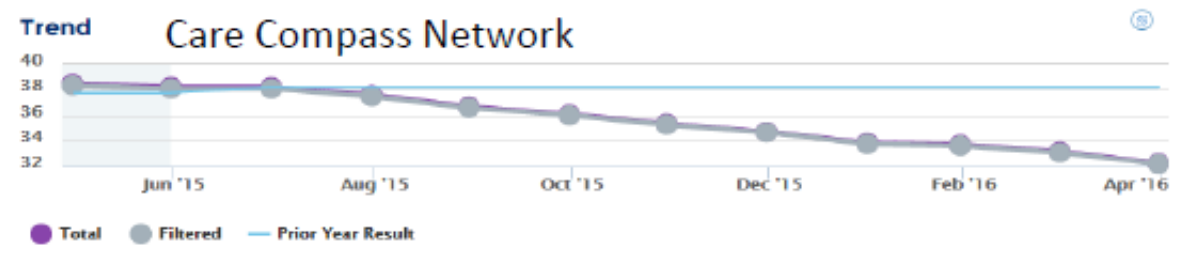
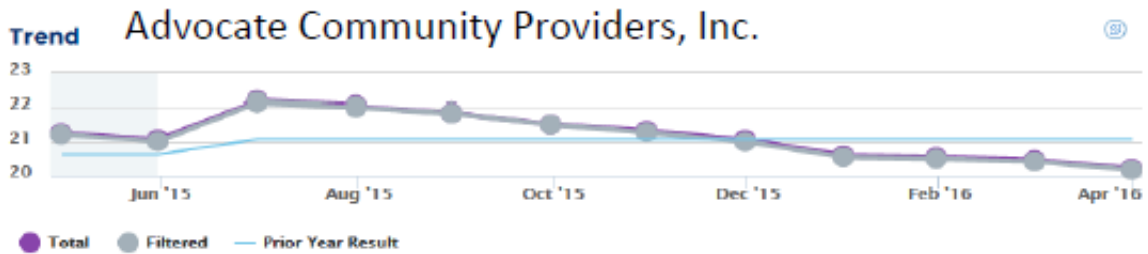
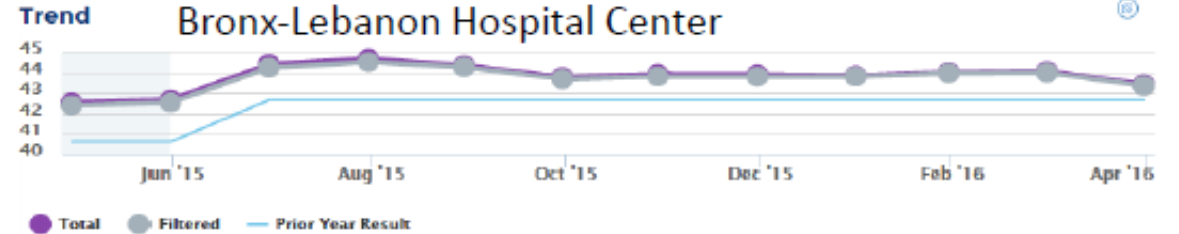
Potentially Preventable ED Visit Trends

Statewide Trend:

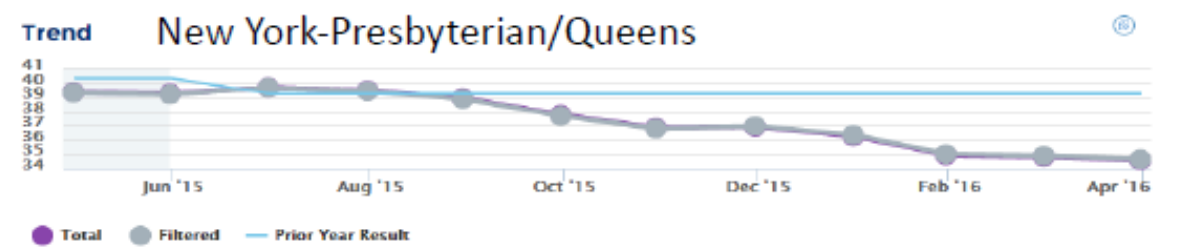
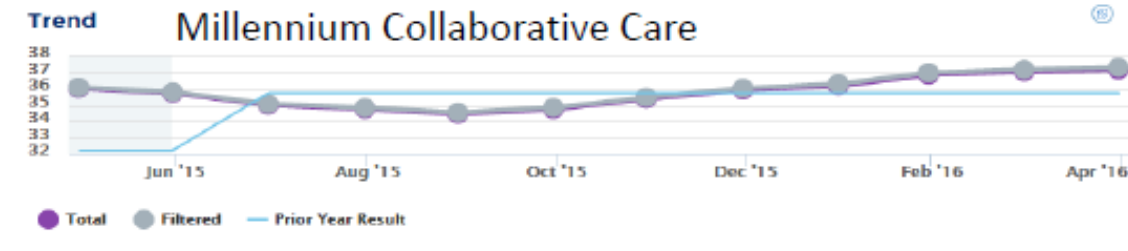
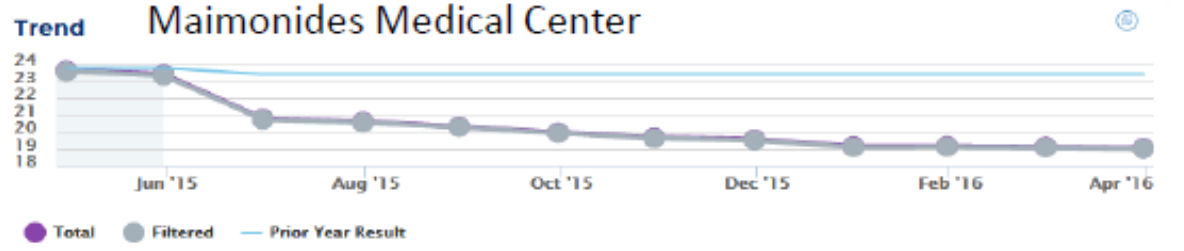
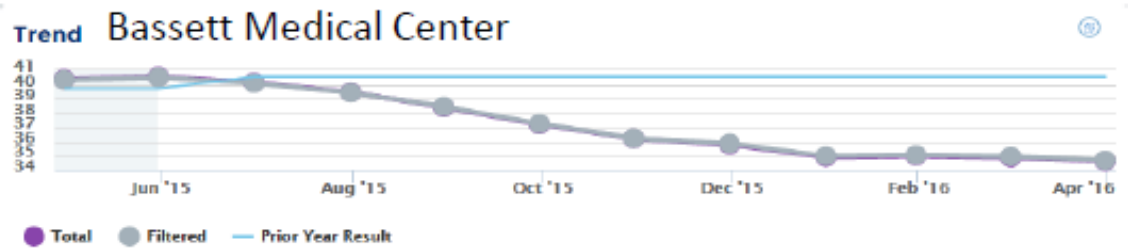
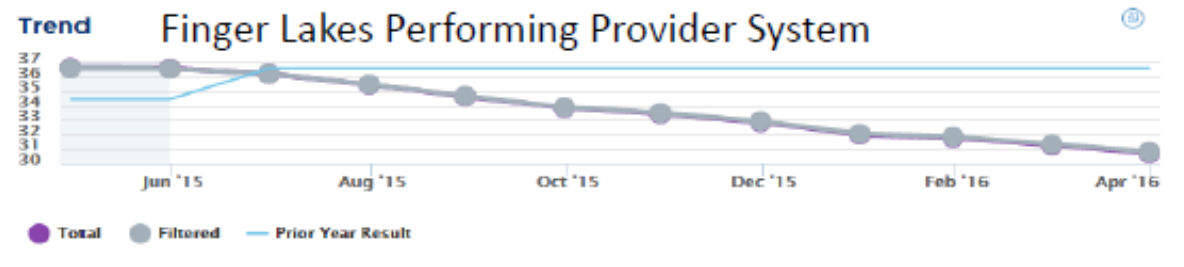
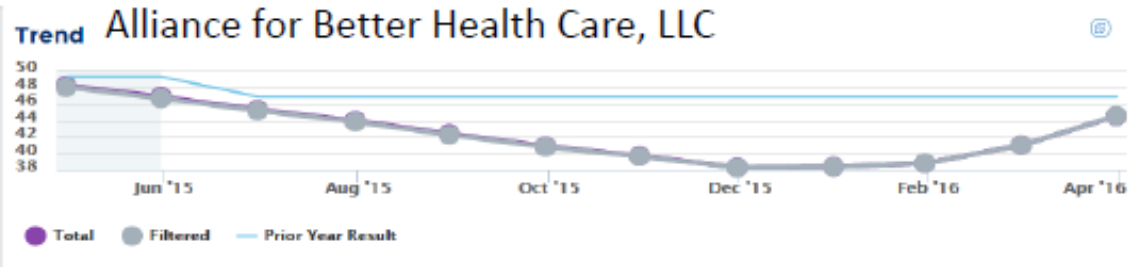


Many PPS are contributing to the statewide decrease in the rate of Potentially Preventable ED Visits

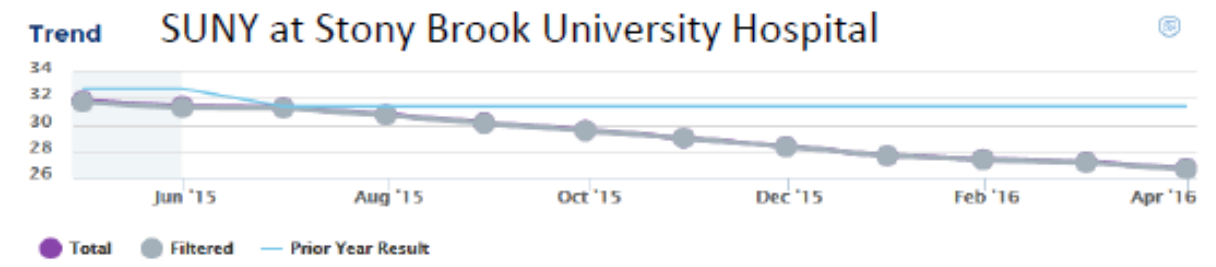
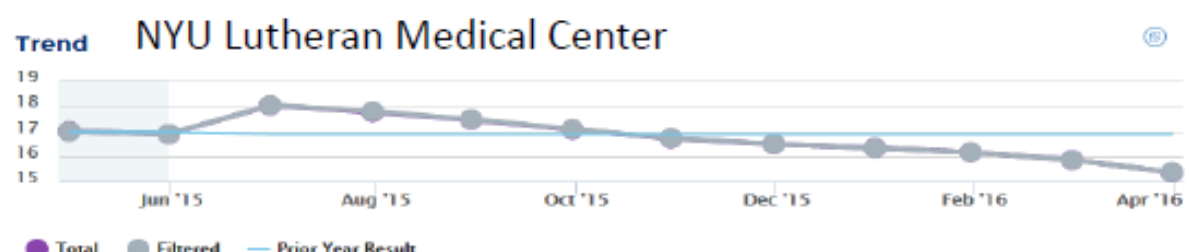
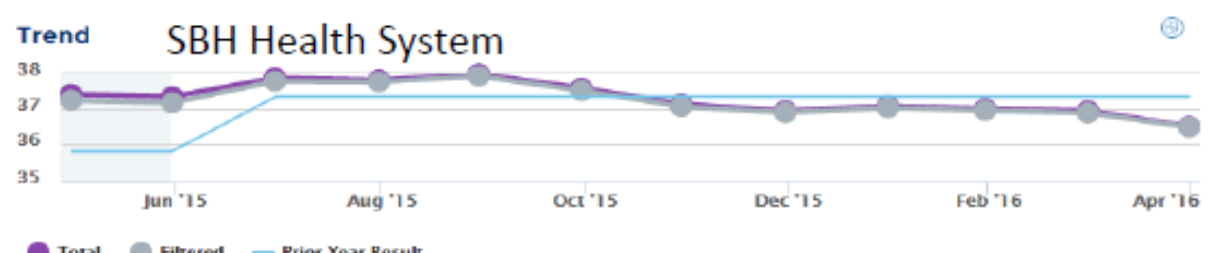
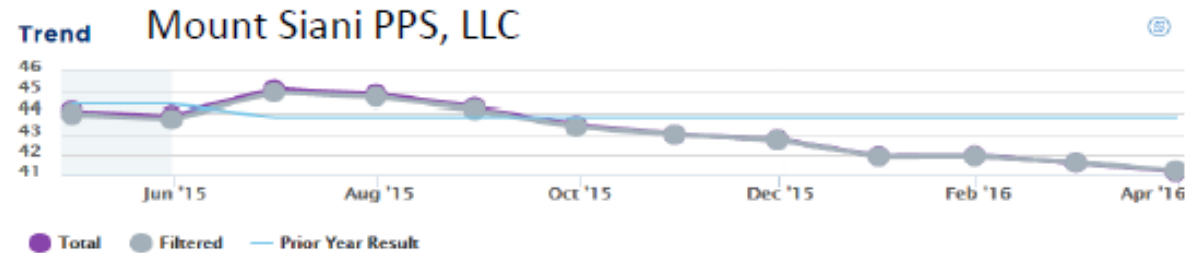
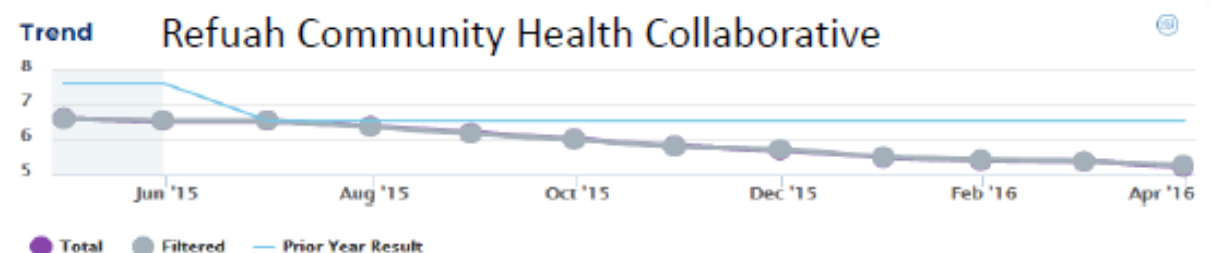
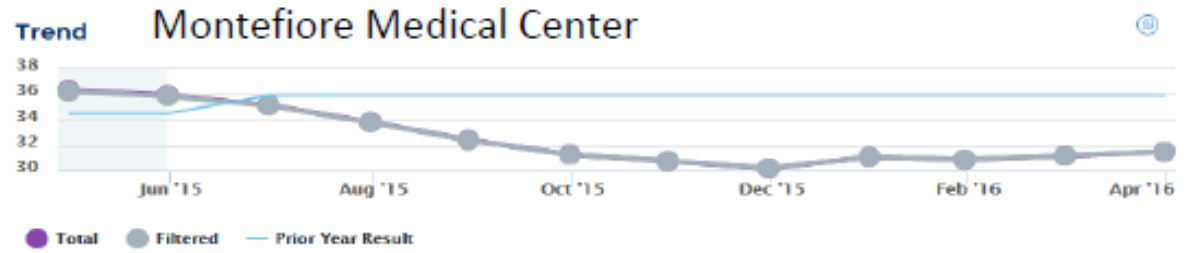
Potentially Preventable ED Visit Trends



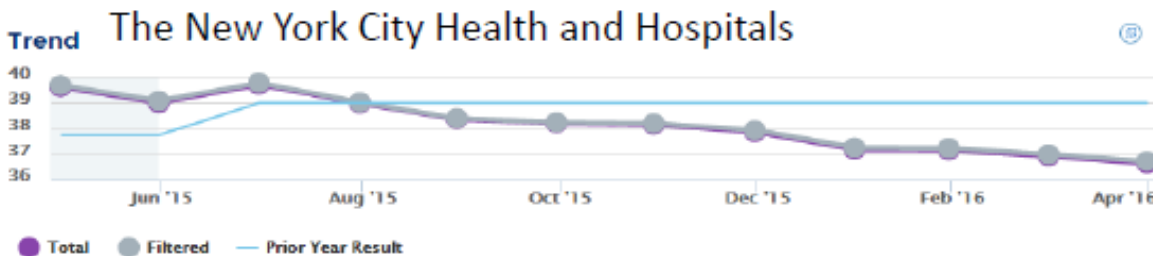
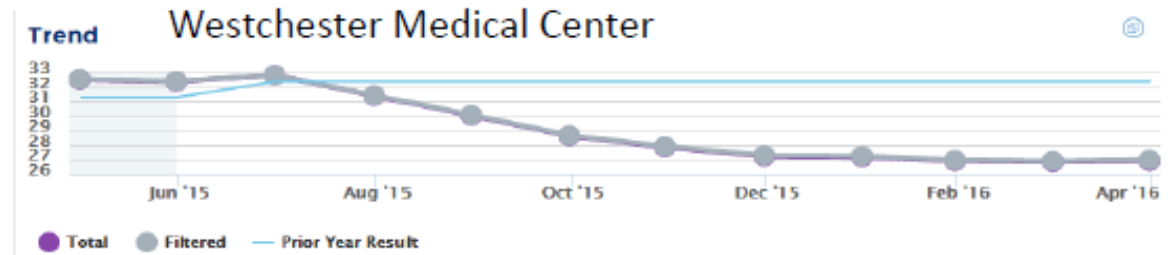
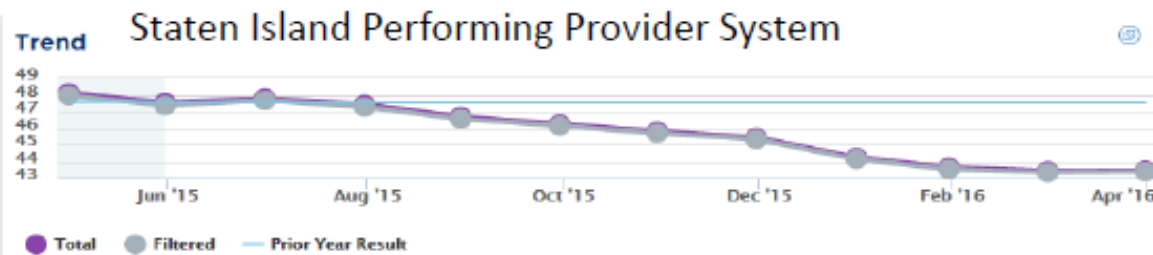
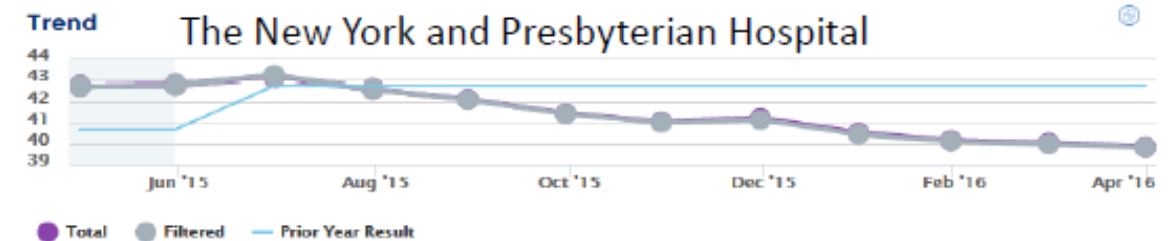
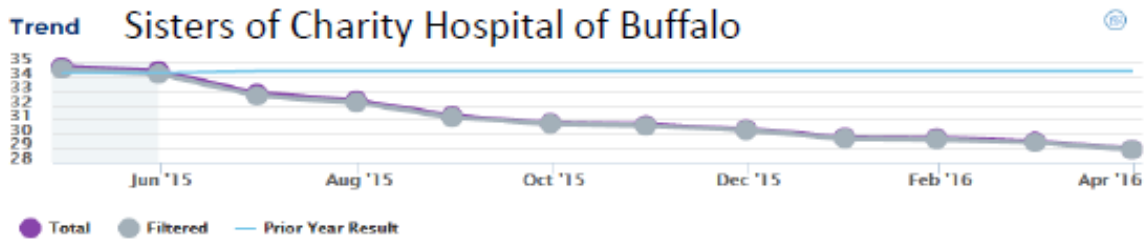
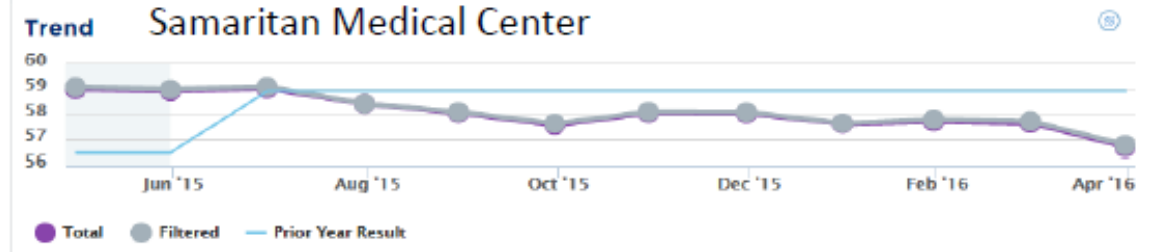
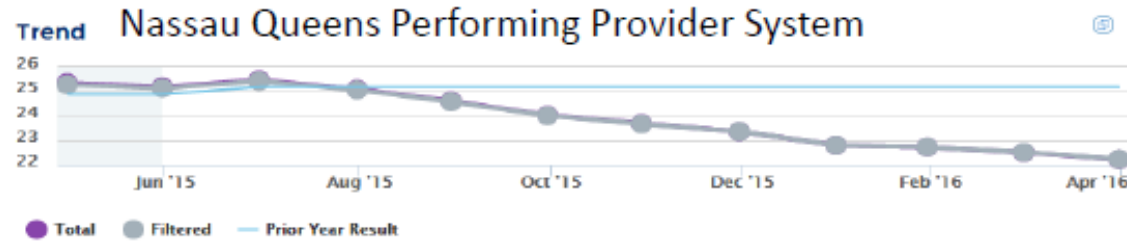
Potentially Preventable ED Visit Trends



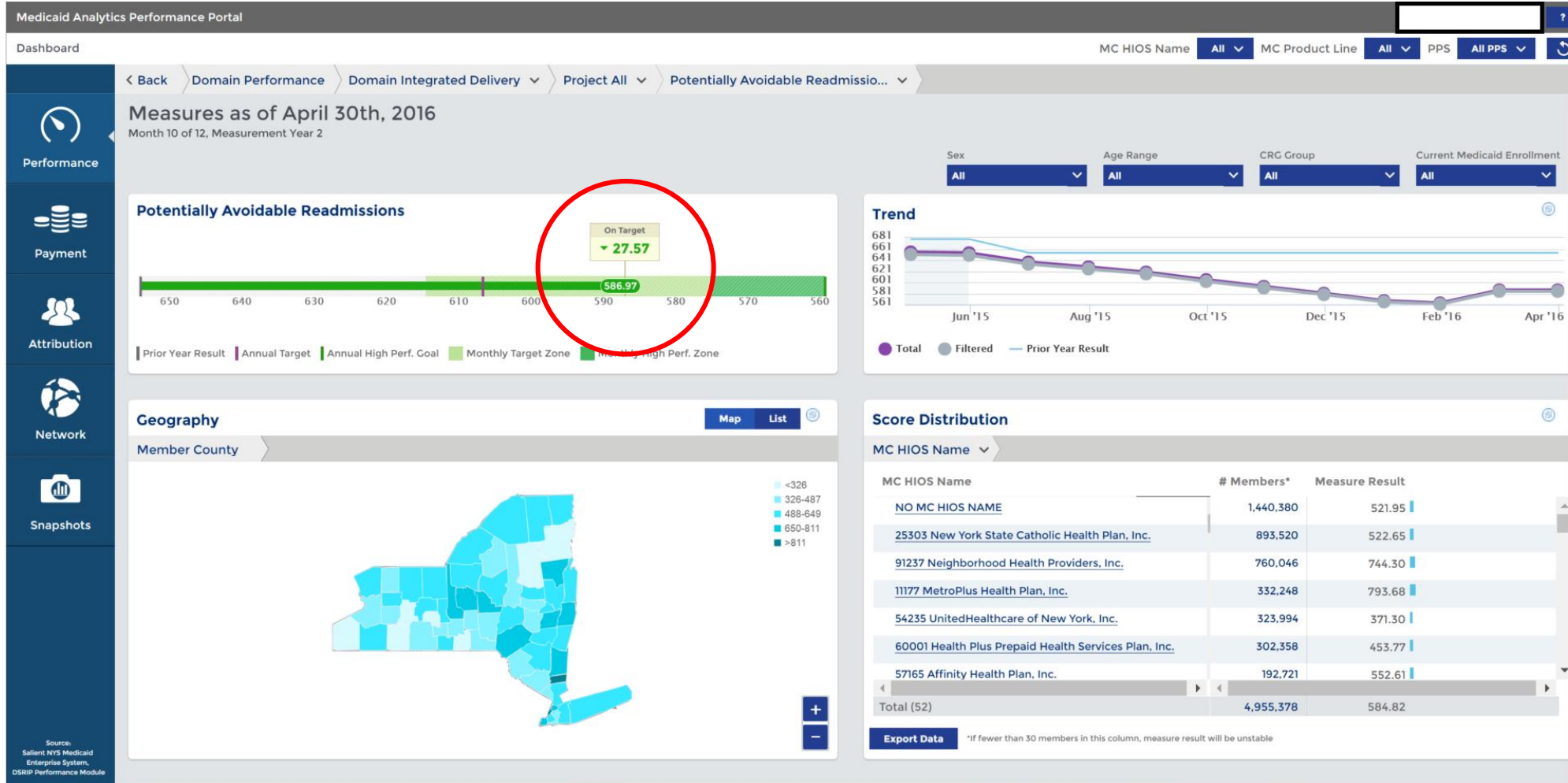
Potentially Preventable ED Visit Trends



Potentially Preventable ED Visit Trends

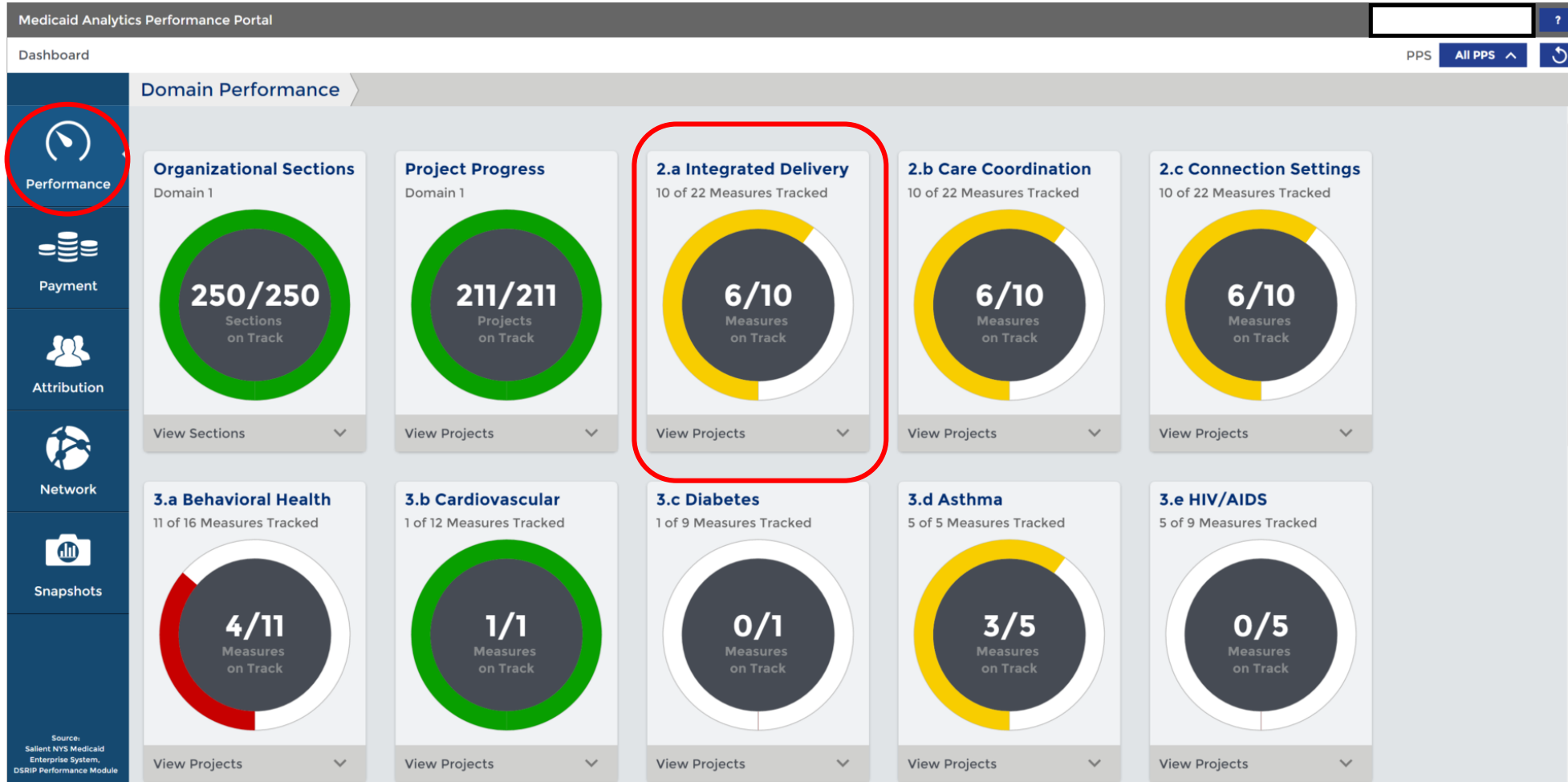


Potentially Preventable Readmissions



Potentially Preventable Readmission rates are also trending down markedly across the State.

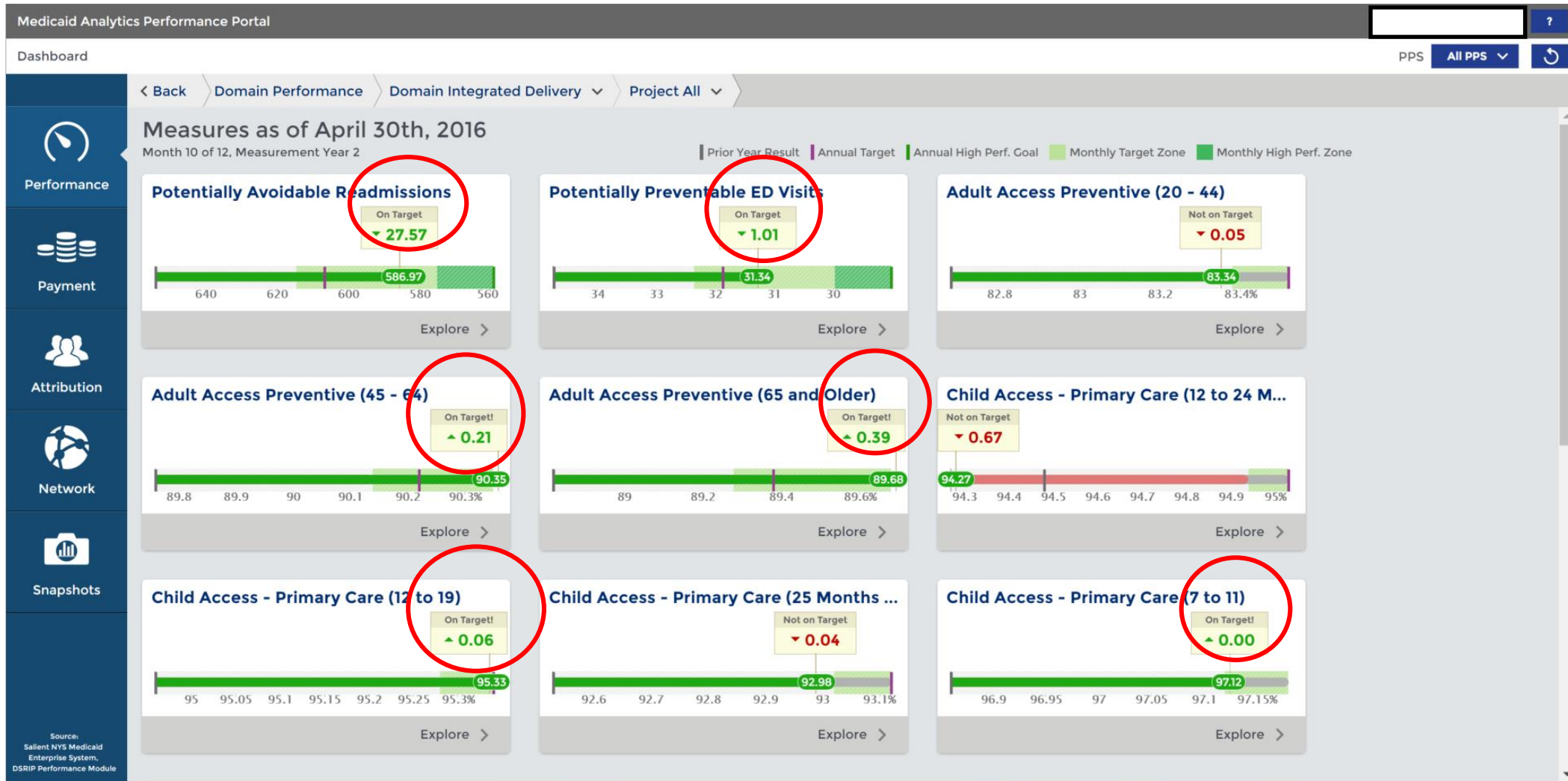
Overall Program Performance



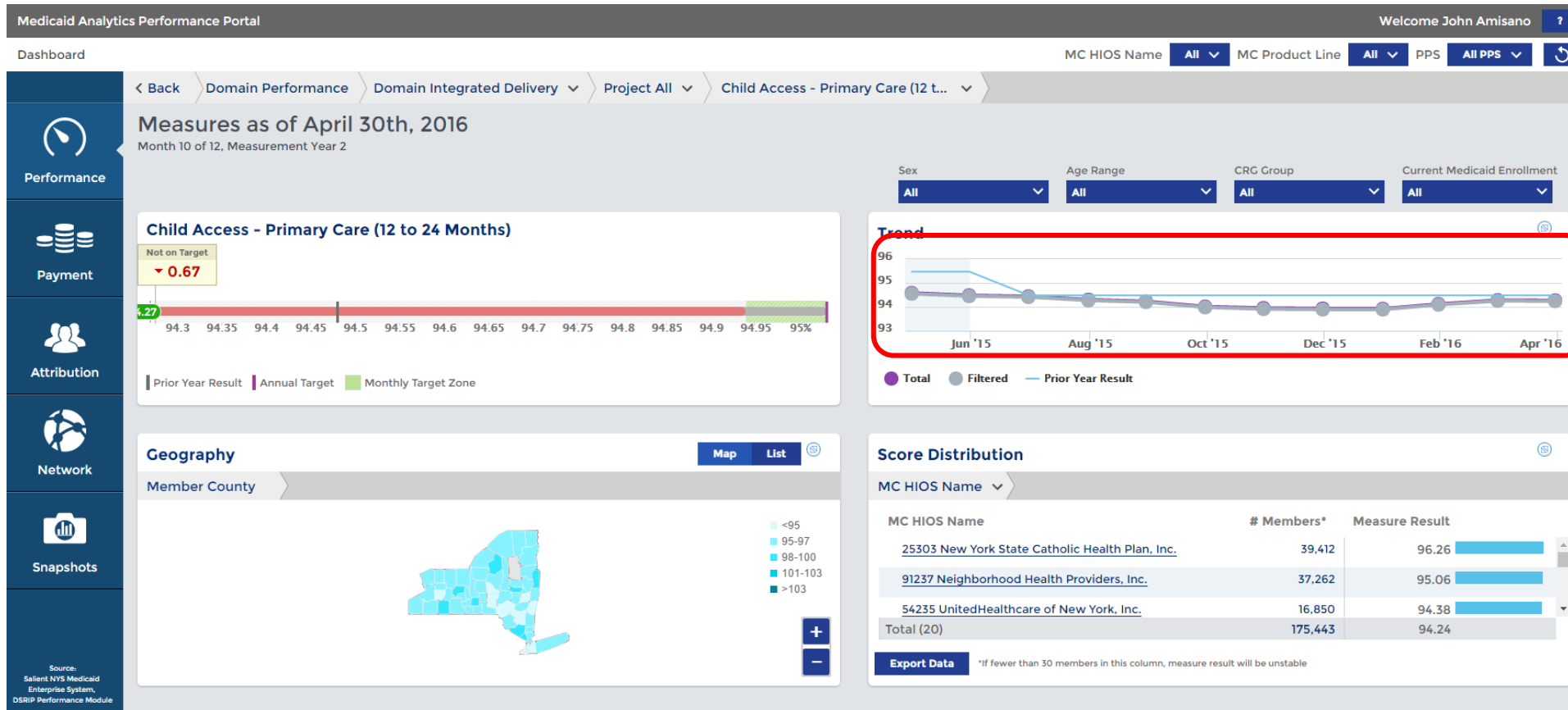
Domain 1 measures have all been met.

System transformation domains are on track to meeting annual target on 6 of 10 claims-derived measures.

Integrated Delivery System (Domain 2) Measures – 6 Measures On Track; 2 are close; 1 is slipping (excluding PQIs and PDIs)



Child Access to Primary Care for 12 – 24 month old children

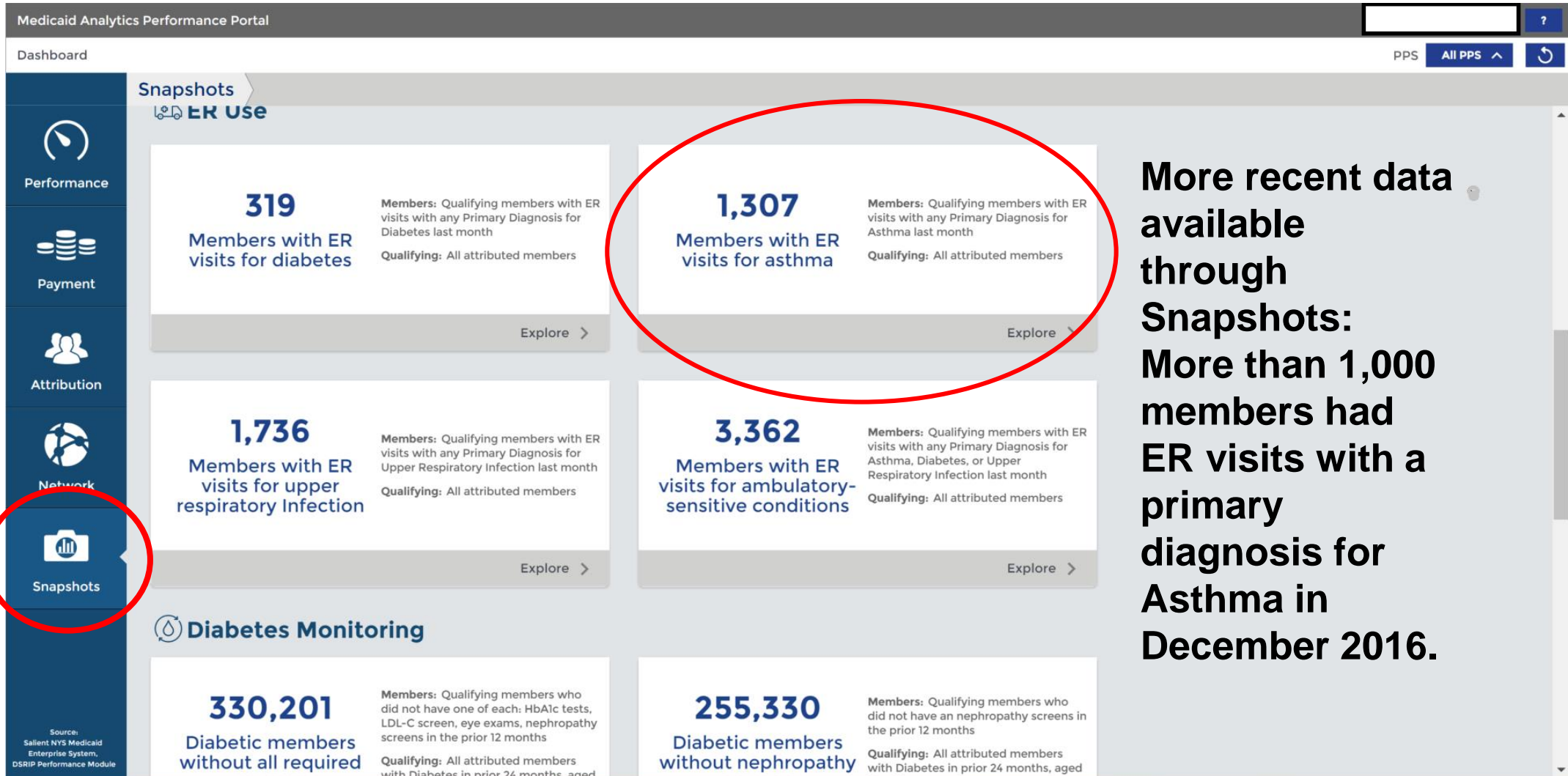


Prior Year Result: 94.48% of Children with a PC Visit

Most Recent Result: 94.27%

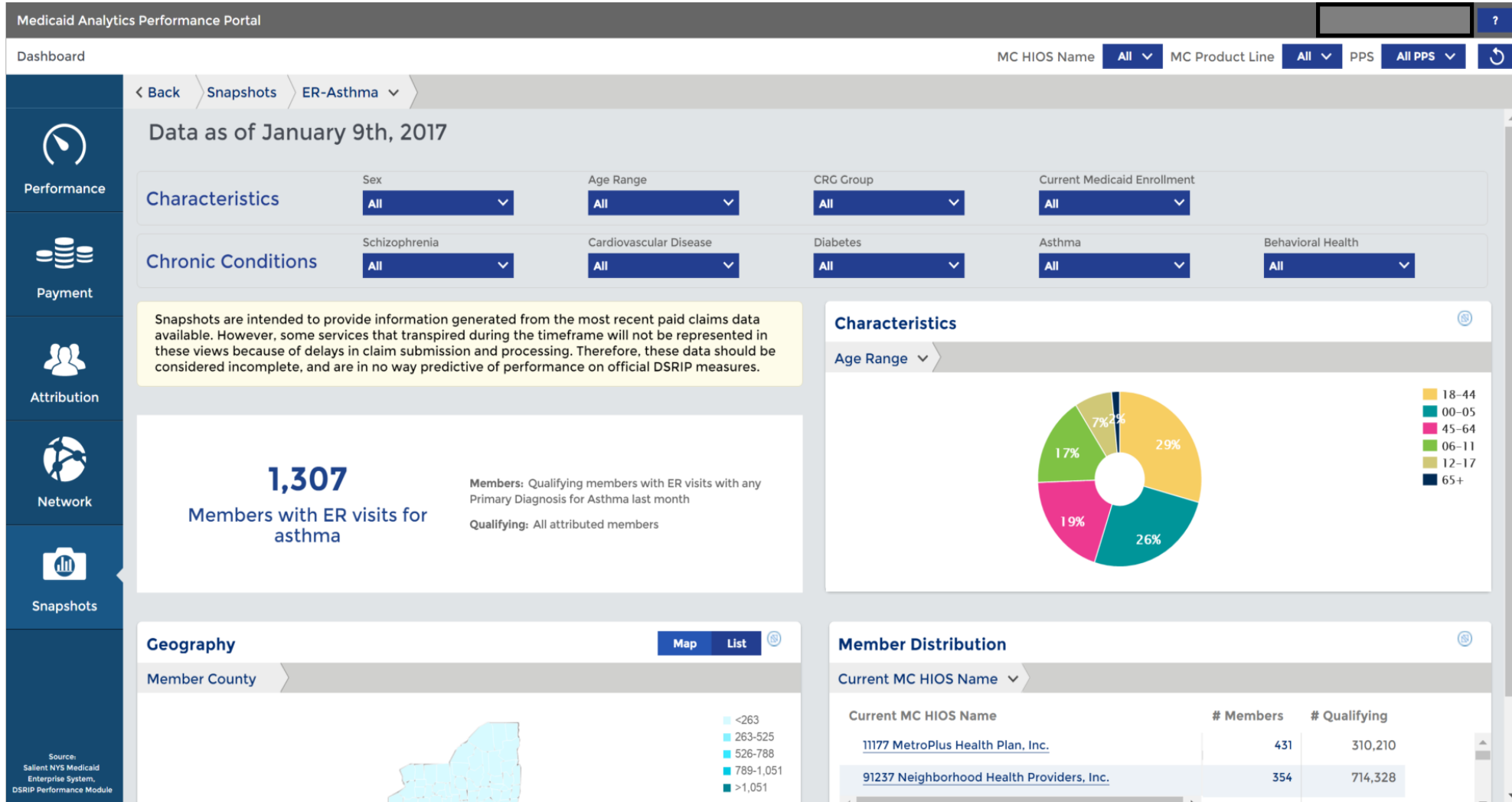
Some backsliding, however starting from high baseline performance

Asthma-Related ER Visits



More recent data available through Snapshots: More than 1,000 members had ER visits with a primary diagnosis for Asthma in December 2016.

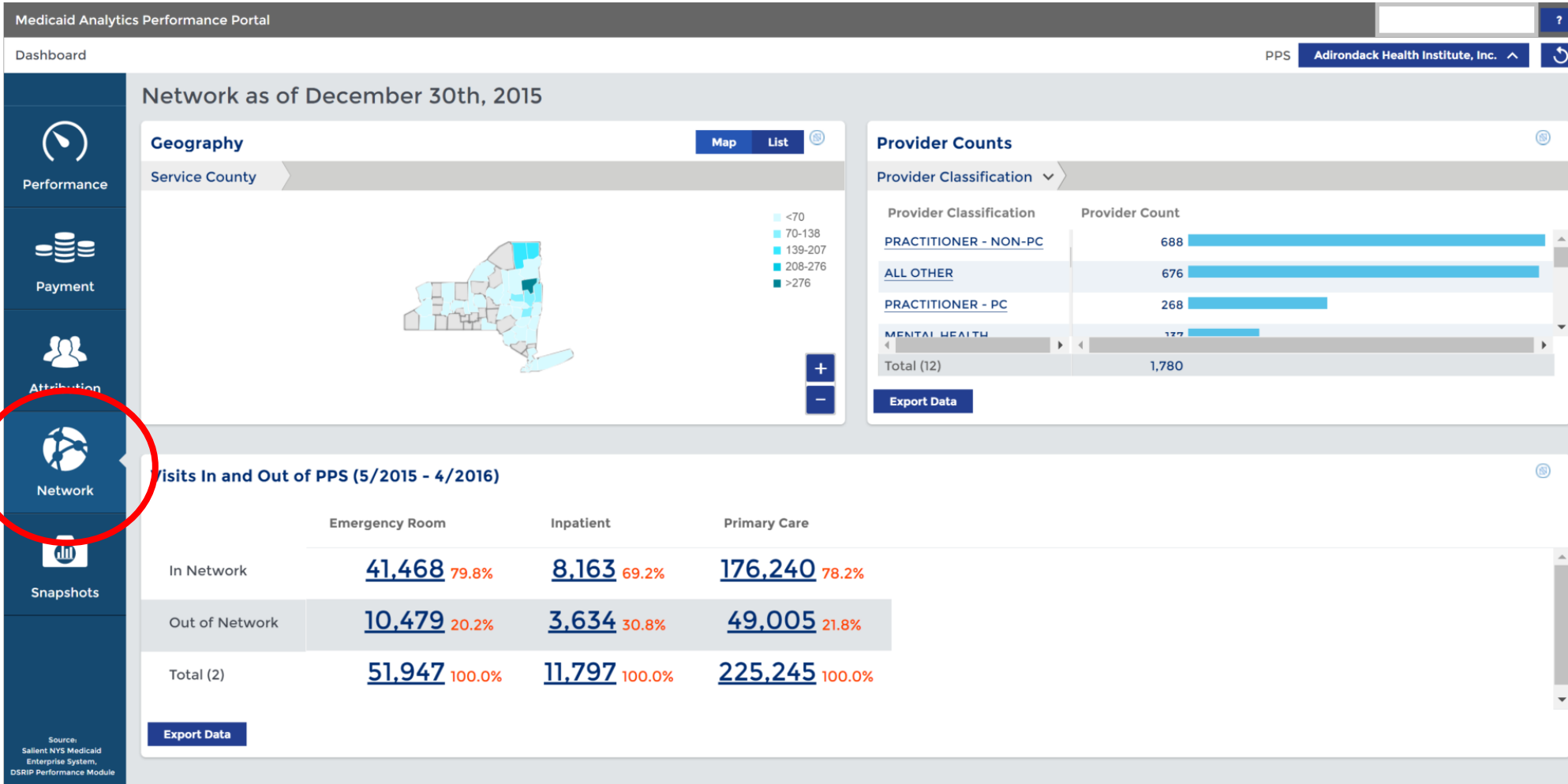
Detail on Asthma-Related ER Visits



43% of Asthma ED Visits for children under 11

Authorized PPS users can get listing and contact information for these members

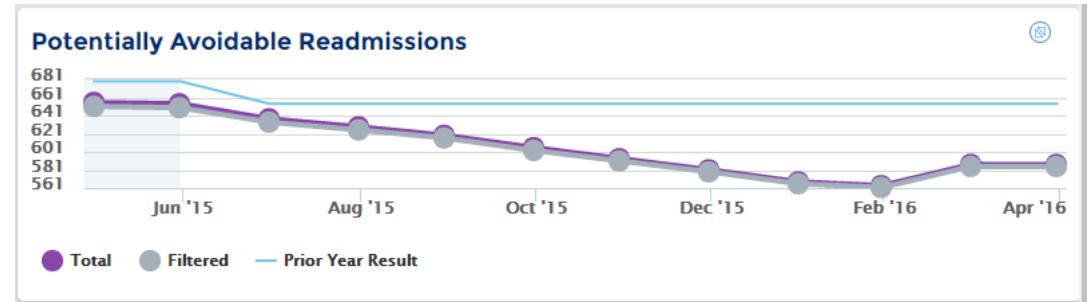
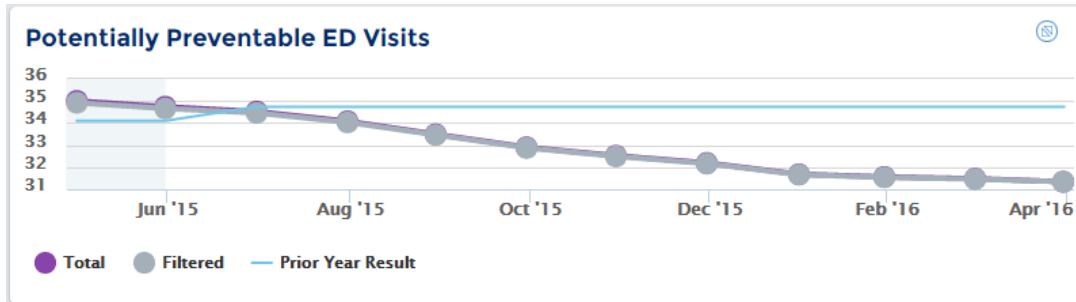
Provider Networks



Each PPS can view the count of providers by classification.

Out-of-network care reducing as more providers are engaged by PPS.

Key Take-Aways



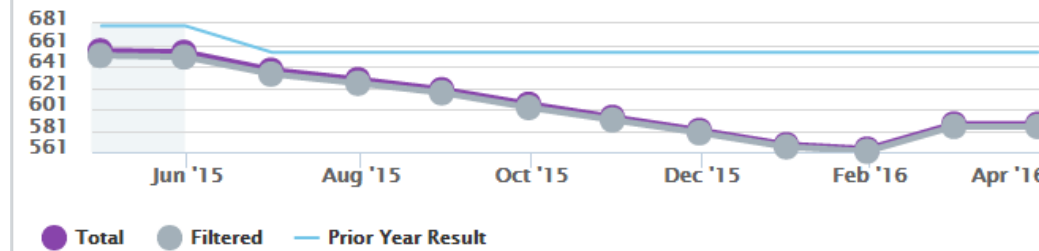
- PPS continue to early close to 100 percent of DSRIP dollars but focus will now change from process to outcome.
- Early indications of promising progress in achieving the core DSRIP objective: reduction in the rate of avoidable hospital use.
- Promising early results from a number of other claims-derived measures.
- Some measures have high performance starting points – improvement will be challenging.
- PPS and State have good tools to manage performance but population health management capacity still evolving.
- We will keep the PAOP posted – offering a live demo of MAPP tools and regular performance updates.

Appendix: Preventable Readmission Trends

Appendix: Potentially Preventable Readmission Trends

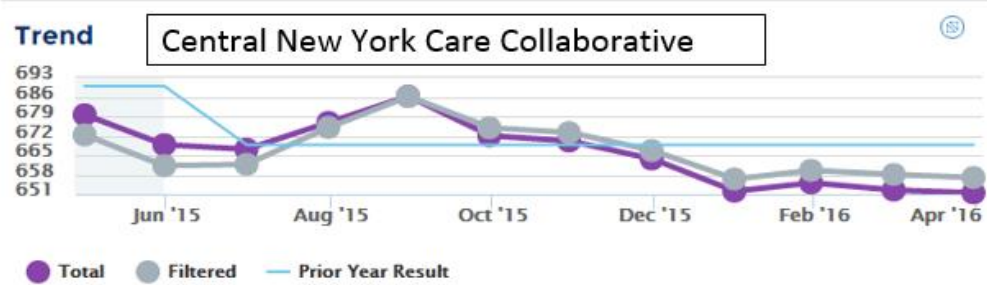
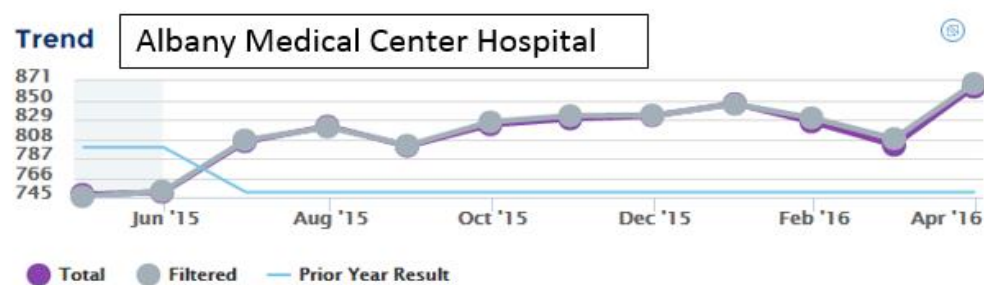
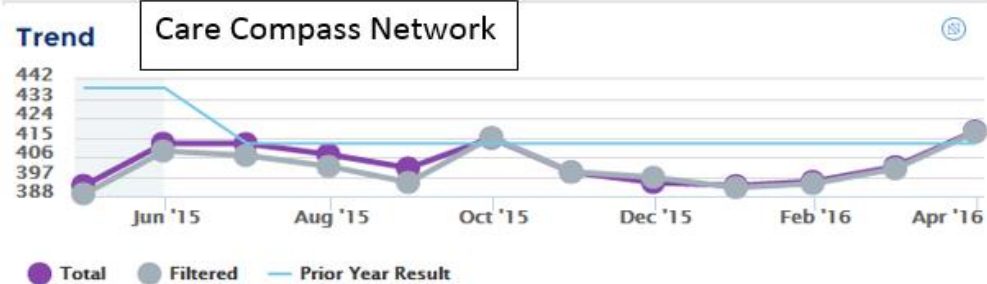
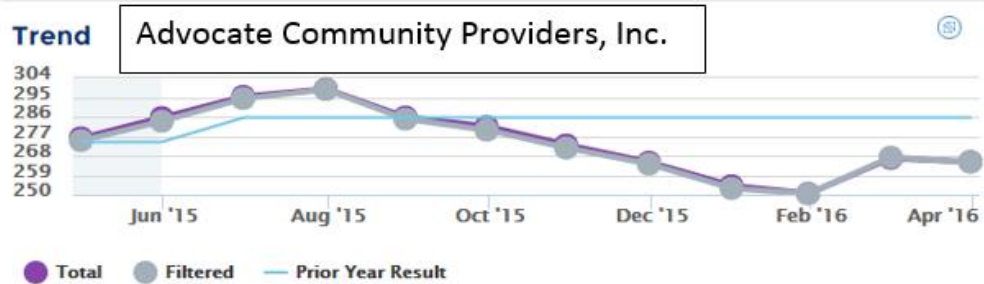
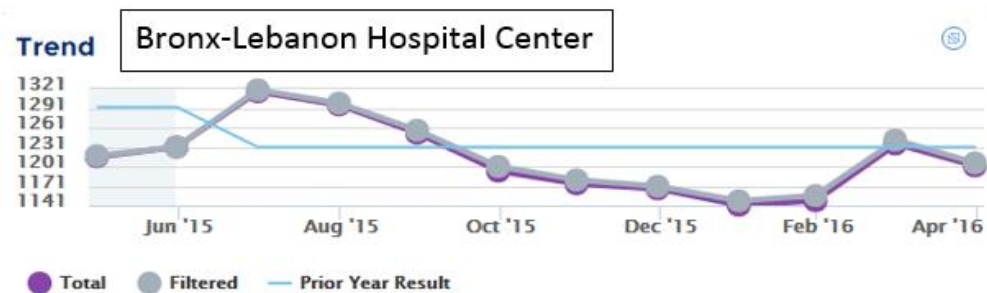
Statewide Trend:

Potentially Avoidable Readmissions

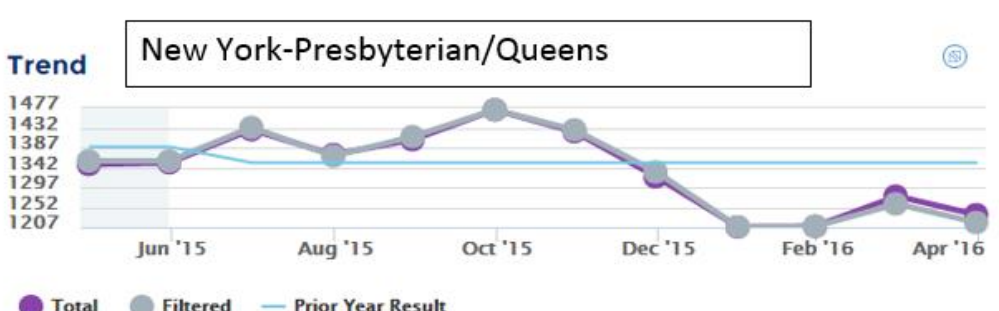
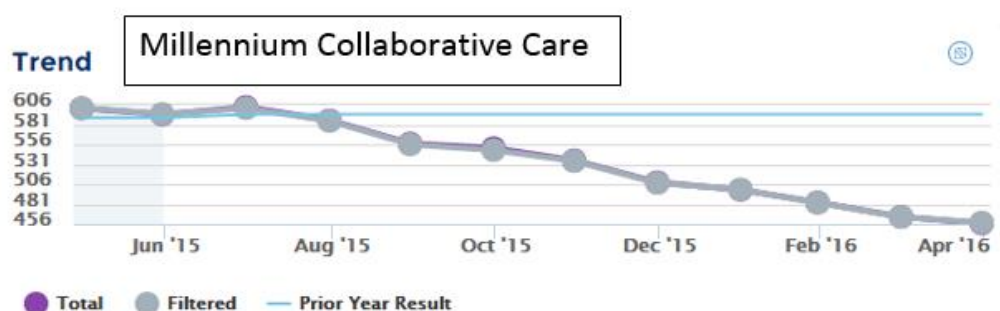
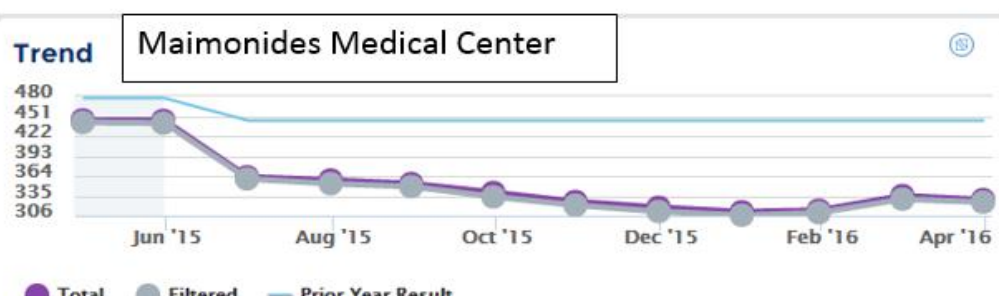
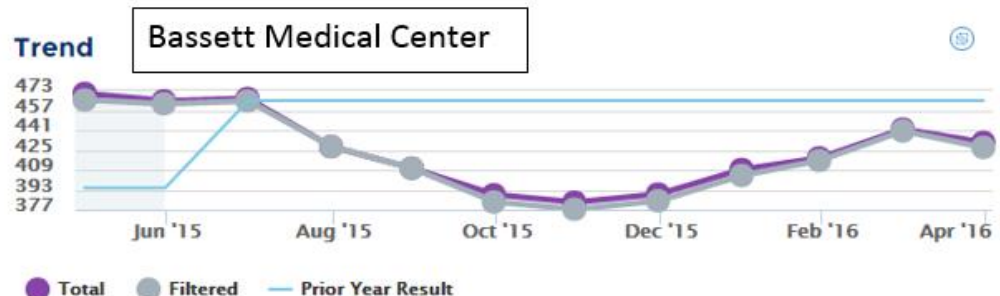
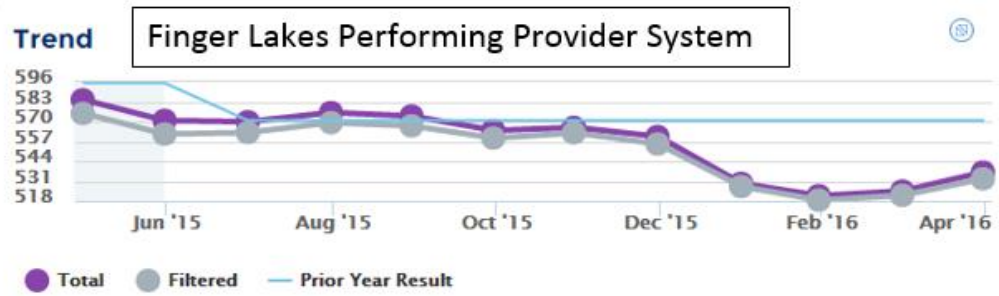


Many PPS are contributing to the statewide decrease in the rate of Potentially Preventable Readmissions.

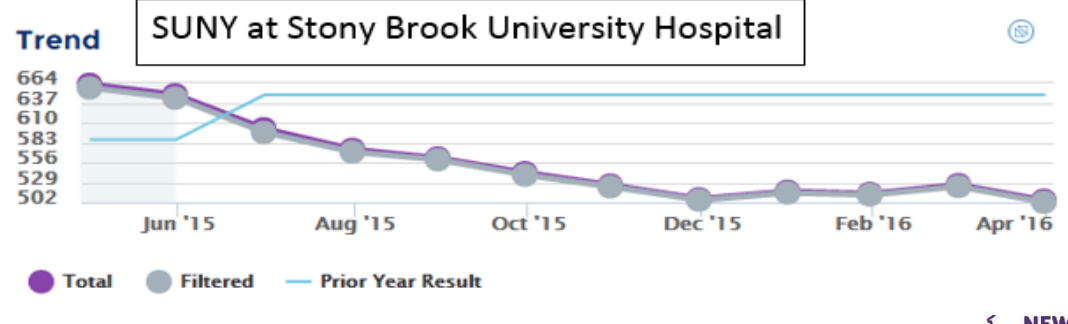
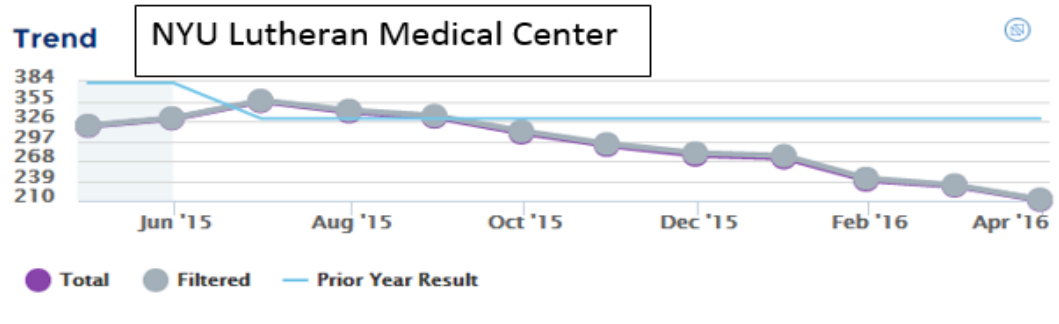
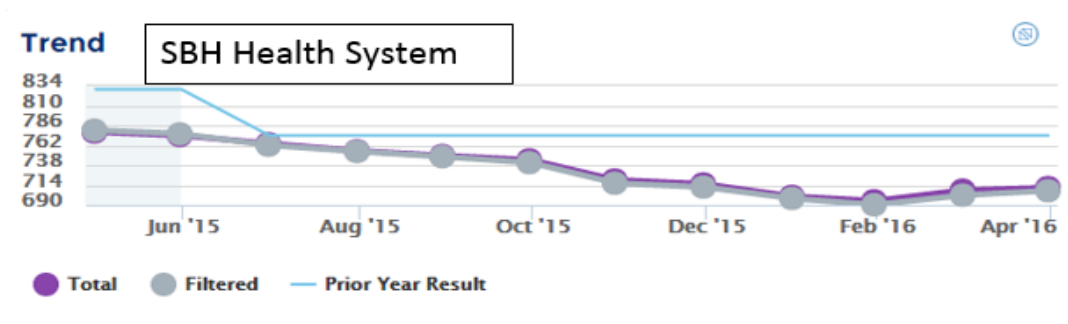
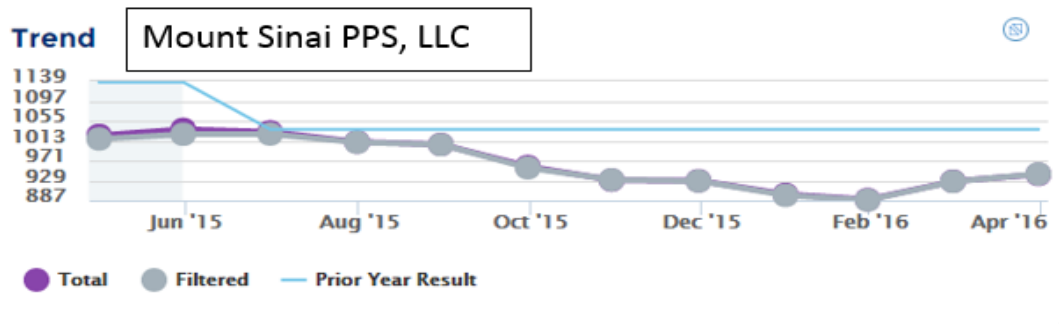
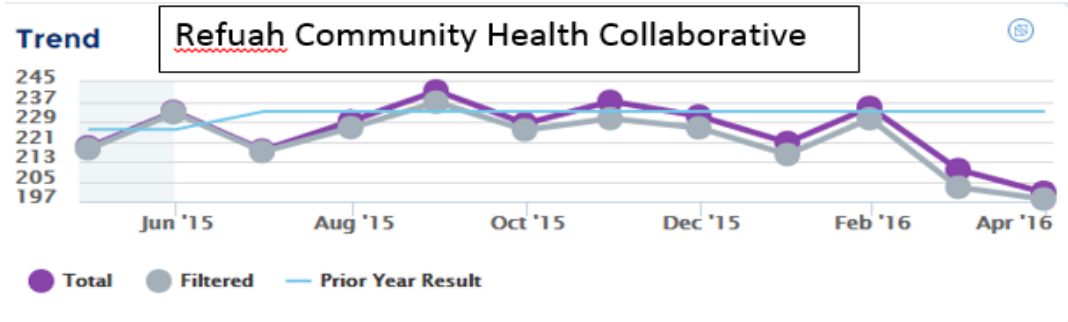
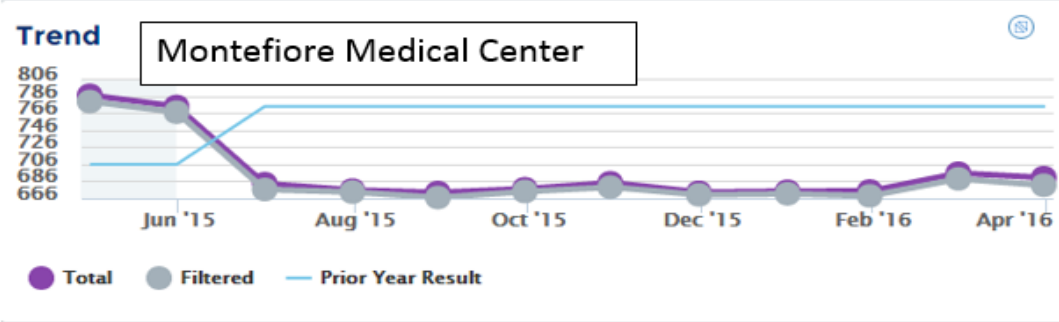
Appendix: Potentially Preventable Readmission Trends



Appendix: Potentially Preventable Readmission Trends



Appendix: Potentially Preventable Readmission Trends



Appendix: Potentially Preventable Readmission Trends

