

Leatherstocking Collaborative Health Partners PPS DSRIP Year 3, Quarter 2 APPEAL

Leatherstocking Collaborative Health Partners PPS (LCHP) submitted an appeal requesting that the Independent Assessor (IA) reconsider the Patient Engagement submission for Projects 2.b.viii and the initial determination for 2.d.i Milestone 9.

Project 2.b.viii– Patient Engagement Speed

Required Documentation

The PPS was required to submit documentation to support the numbers of Actively Engaged members reported by the PPS in their DY3, Q2 Quarterly Report. The supporting documentation must include at a minimum the Medicaid CIN# (Client Identification Number) or the Medicaid HMO Policy Number.

Independent Assessor’s Initial Determination

Initial IA Determination

LCHP PPS was not awarded the Patient Engagement Speed Achievement Value for this project.

Rationale for Initial IA Determination

Project 2.b.viii

PPS Committed Number: 393

PPS Reported Number: 316

IA Approved Number: 311

Percentage of Commitment: 79.13%

The PPS submitted an Excel spreadsheet which contains a count of 316 Medicaid CIN/Insurance Identification #'s for DY2, Q1 through DY2, Q4. The IA approved a count of 311.

LCHP PPS Appeal

LCHP subsequently filed a formal appeal to the IA’s initial determination.

Independent Assessor’s Final Determination

Final IA Determination after Appeal

The Patient Engagement Speed AV will be upheld as Fail. The IA Approved Number for Project 2.b.viii will remain at 311.

Rationale for Final IA Determination

Upon appeal, the IA reviewed the documentation submitted by LCHP. The IA determined that 5 of the reported numbers did not contain either a Medicaid CIN# (Client Identification Number) or the Medicaid HMO Policy Number and therefore they cannot be included in the IA Approved Number.

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Project 2.d.i – Milestone 9

Required Documentation

The PPS was required to submit documentation to demonstrate completion of the following Project Requirement:

Measure PAM® components, including:

- Screen patient status (UI, NU and LU) and collect contact information when he/she visits the PPS designated facility or “hot spot” area for health service.
- If the beneficiary is UI, does not have a registered PCP, or is attributed to a PCP in the PPS’ network, assess patient using PAM® survey and designate a PAM® score.
 - Individual member's score must be averaged to calculate a baseline measure for that year’s cohort.
 - The cohort must be followed for the entirety of the DSRIP program.
- On an annual basis, assess individual members’ and each cohort’s level of engagement, with the goal of moving beneficiaries to a higher level of activation.
- If the beneficiary is deemed to be LU & NU but has a designated PCP who is not part of the PPS’ network, counsel the beneficiary on better utilizing his/her existing healthcare benefits, while also encouraging the beneficiary to reconnect with his/her designated PCP.
 - The PPS will NOT be responsible for assessing the patient via PAM® survey.
 - PPS will be responsible for providing the most current contact information to the beneficiary’s MCO for outreach purposes.
- Provide member engagement lists to relevant insurance companies (for NU & LU populations) on a monthly basis, as well as to DOH on a quarterly basis. (emphasis added)

There is one metric for this Project Requirement, which requires the PPS to demonstrate the following: Performance measurement reports established, *including but not limited to:*

- Number of patients screened, by engagement level
- Number of clinicians trained in PAM® survey implementation
- Number of patient: PCP bridges established
- Number of patients identified, linked by MCOs to which they are associated
- Member engagement lists to relevant insurance companies (for NU & LU populations) on a monthly basis (emphasis added)
- Member engagement lists to DOH (for NU & LU populations) on a monthly basis
- Annual report assessing individual member and the overall cohort’s level of engagement

Independent Assessor’s Initial Determination

Initial IA Determination

LCHP PPS was not awarded the Achievement Value for this milestone.

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Rationale for Initial IA Determination

LCHP PPS failed to demonstrate evidence of completion of all milestone requirements. Specifically, the PPS failed to demonstrate that it is sharing member engagement data for low and non-utilizing population on a monthly basis with managed care organizations.

LCHP PPS Appeal

LCHP subsequently filed a formal appeal to the IA's initial determination. In their appeal, the PPS states the following:

"In our PPS, we have already had a foundation in place with pieces of this work being done. The foundation is laid by Bassett Healthcare Network, the lead agency for DSRIP, which also leads programs like Medicaid Health Home, PHIP, ACO, ACQA, PCMH as well as several other state initiatives and employs >90% of PCP practitioners in our PPS. Specifically for PAM project, the infrastructure is laid on Medicaid Health Home as the leader of this work to reduce duplicate efforts with the same members. As a result, the existing relationships with MCO's is leveraged for DSRIP purposes as well as this metric purpose. Per our understanding, the intent of the highlighted red bullet is that the MCOs are able to outreach the NU and LU lists that we are required to send them. We have the set up and are actively doing that outreach real-time with members within our PPS. MCO's send lists to Bassett Healthcare Network who follows up as appropriate depending on the initiative that it is leading (listed above). The PPS and contracted partners share NU/LU/UI members real time with community navigators, PCP's, Certified Application Counselors, etc. in the moment to connect patients to needed services and meet their needs. We believe that we are going above and beyond what is required by the milestone by taking on the outreach work ourselves. Therefore, we request the IA to consider this appeal to review our explanation."

Independent Assessor's Final Determination

Final IA Determination after Appeal

The Initial Determination will be upheld and the PPS will not be awarded the Achievement Value for this milestone.

Rationale for Final IA Determination

The Project Requirement and metric both specifically require the PPS to provide member engagement lists to relevant insurance companies (for NU & LU populations) on a monthly basis. The PPS did not submit any documentation to demonstrate completion of this requirement. Furthermore, in the appeal language submitted by the PPS, it appears that the PPS concedes that the information is not shared with the relevant insurance companies. As the PPS did not demonstrate completion of all components of this Project Requirement, the IA cannot award the corresponding Achievement Value.

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Finally, the IA notes that the PPS did not submit their appeal in the format described in the “DSRIP Independent Assessor Policy and Procedure: Appeal Process for Quarterly Report Achievement Value (AV) Scoring” document dated March 4, 2016. Failure to follow the process detailed in this document may result in a dismissal of any appeal.