Value Based Payment Quality Improvement Program (VBP QIP)

Update Webinar

Today's Agenda

- VBP QIP Financing
- VBP QIP P4P Updates
 - Sepsis Bundle Policy Change
- VBP QIP Contracting
- VBP QIP Program Reminders
- Resources and Q&A



VBP QIP Financing – Demonstration Year 3 (DY3) Pairings

VBP QIP SFY 17 -18 Pairings & Funding

мсо	PPS	Facility	Gross Funding
Affinity	Maimonides Medical Center	Brookdale Hospital	\$31,000,000
Arrilley	Montefiore Hudson Valley Collaborative	St. Joseph's Hospital	\$7,800,000
A	Nassau Queens Performing Provider System, LLC	Nassau University MedicalCenter	TBD
Amerigroup	Advocate Community Partners	Jamaica Hospital	\$16,000,000
Emblem Health(HIP)	Health and Hospitals Corp.	Health and Hospitals Corp.	TBD
	Central New York Care Collaborative, Inc.	Lewis County General Hospital	\$2,036,000
		Orleans Community Hospital	\$1,434,039
Excellus	Finger Lakes Performing Provider Systems, Inc.	St James MercyHospital	\$1,844,635
		Wyoming County Community Health	\$1,000,000
	Mohawk ValleyPPS	A O Fox Memorial Hospital	\$1,000,000
	Maimonides Medical Center	Interfaith Medical Center	\$50,000,000
	Maillolliues Medicarceller	Kingsbrook Jewish Medical Center	\$50,000,000
	Manta Stand Hardan Valley Callah erative	Montefiore – Mount Vernon	\$11,096,728
Fidelis	Montefiore Hudson Valley Collaborative	Nyack Hospital	\$17,747,861
Flueiis	Nassau Queens Performing Provider System, LLC	St. John's Episcopal	\$27,650,000
	W Leater MedicalContor	Bon Secours Charity Health	\$2,898,070
	Westchester MedicalCenter	Good Samaritan Hospital Suffern	\$2,000,000
	Advocate Community Partners	Jamaica Hospital	\$9,000,000
HealthFirst	Maimonides Medical Center	Brookdale Hospital	\$109,000,000
MetroPlus	Health and Hospitals Corp.	Health and Hospitals Corp.	TBD
MVP	Montefiore Hudson Valley Collaborative	Montefiore - New Rochelle	\$20,837,141
IVI V P	Westchester MedicalCenter	Health Alliance(Benedictine)	\$2,999,926
III II II II II II II Dlan	Central New York Care Collaborative, Inc.	Rome Memorial Hospital	\$1,000,000
United Health Plan	Maimonides Medical Center	Wyckoff Heights MedicalCenter	\$70,000,000
Wellcare	Montefiore Hudson Valley Collaborative	St. Luke's Cornwall	\$19,301,520 epartme i
* VBP QIP funding amounts	do not include premium admin, surplus, or taxes		OPPORTUNITY. of Health

VBP QIP Financing

- At the August webinar, DOH indicated MCOs should continue paying at DY2 rates because the DY3 rates had not yet effectuated.
- The DY3 rates were loaded on September 6, therefore MCOs should be paying at the DY3 rate.
- The January 2017 rate package has been approved by the Division of Budget, however, the date to effectuate the rates has not been determined.
- A reconciliation will be performed at a later date and will eliminate all DY3 variances.
- For questions on VBP QIP financing, please contact bmcr@health.ny.gov



VBP QIP Financing – Rate Setting Background

		30 days	7-30 days	45 days		
Rates are set	DOH Finalizes Rates	Plans rate review period	DOB Review	CMS Review	Rates effectuated on eMedNY system	Funds are transferred to each Plan's partnered
					•	arrangement

- Rate Setting starts at the beginning of the fiscal year with adjustments made throughout the year
- The initial rates for the fiscal year are based on <u>enrollment projections</u> thus the need to reconcile later in the fiscal year
 - Any shortfalls or overages are usually reconciled in the last rate package of the fiscal year unless advised otherwise
- All supplemental programs (VBP QIP, EIP, EPP, AHPP) are sub-components of the rate package, but not the rate package in its entirety
- Timing of supplemental program payments are impacted by non-supplemental related adjustments/revisions within the rate package(s)

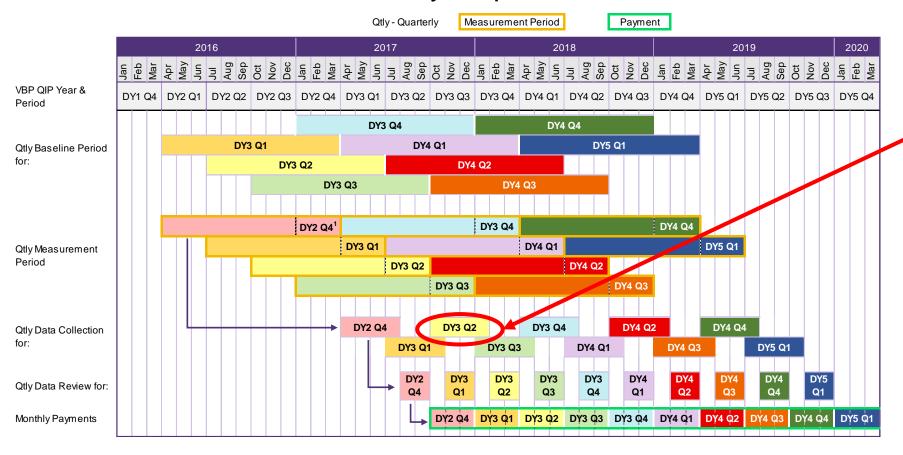


VBP QIP P4P Updates



Key Deliverable Deadlines

DY3 Q2 concludes on Saturday, September 30th



Facilities have 120 days to collect data for DY3 Q2 and submit quarterly report to VBP QIP paired MCO.

 Facilities should submit the DY3 Q1 QIT report to VBP QIP paired MCOs by October 31st, 2017.



VBP QIP P4P – Quarterly Improvement Targets

• The table below outlines upcoming activities related to DY2 Q4, DY3 Q1, and DY3

Q2 P4P reporting.

Measurement Quarter	DY2 Q4	DY3 Q1	DY3 Q2
Measurement Period	April 1, 2016 to March 31, 2017	July 1, 2016 to June 30, 2017	October 1, 2016 to September 30, 2017
Facility reports measurement information to paired MCO	July 31, 2017	October 31, 2017	January 31, 2018
Paired MCO reviews achievement of QIT and prepares payment	September 29, 2017	December 31, 2017	March 31, 2018
Paired MCO makes monthly payments to the Facility for achievement of QIT	October, November, and December 2017	January, February, and March 2018	April, May, and June 2018
Paired MCO sends P4P Performance Report to DOH	January 31, 2018	April 30, 2018	July 31, 2018



3-Hour Sepsis Bundle Update



Sepsis 3-Hour Bundle Policy Change

Data Source and Adherence Measure

The 3-Hour Sepsis Bundle Performance Measure, while still addressing the same care concept, underwent significant changes regarding the protocol of collecting of the treatment elements. This change was implemented and concerns the data with the service dates starting from January 1, 2017.

Time Period

- Old 3-hour sepsis adherence measure availability: January 2015 December 2016
- New 3-hour sepsis adherence measure availability: January 1, 2017 on



Sepsis 3-Hour Bundle Policy Change

- Sepsis will remain pay for reporting through March 31, 2018 and will turn pay for performance in April 1, 2018. The performance measurement period will be April 2017 – March 2018
- A new baseline will be set in March 2018 based on four quarters of data of the new metric.
 - Scenario 1: If a facility maintains or improves in 3 out of 6 measures, then sepsis will be a "freebie" in this quarter as long as the facility adhered to the reporting deadlines. (120 days post closure of the measurement quarter)
 - Scenario 2: If a facility maintains or improves in 4 out of 6 measures without sepsis, then the measure will have no relevance to their performance. Based on the rolling annual, this "free quarter" will fall off in DY 5.
 - Scenario 3: If a facility has no sepsis cases in any quarter, the measure is invalid.

VBP QIP Contracting



VBP QIP Contracting Updates

- Facilities were required to have one (1) Level 1 VBP contract to meet the June 30, 2017 P4R requirement. The MCOs submitted information in accordance with the timeline below.
- DOH contracts group provided feedback to the contracting MCO on the status of the contracts.

September 8, 2017

Contracting MCO submits updated contract and required documentation to DOH contracts group

Updated Contract Statement and Certification form Updated contract



September 29, 2017

DOH contracts group makes determination if the contract meets requirements

Contracting MCO and VBP QIP Facility are notified of DOH determination

VBP QIP paired MCO is also notified of DOH determination

Off-menu contracts may take DOH additional time to review. Therefore, if there are delays in DOH feedback, paired MCOs should continue paying out funds for attestation. The paired MCO can perform a reconciliation in the future if the requirement is not met.



an LOI

Contracting Status

Contract Finalization/Execution Deliverable Submission/Review Contract Preparation Jan- Mar July - Sep Oct - Dec Continue discussions with Facilities submitted all LOIs Facilities and paired MCOs should finalize MCOs or contracting Facilities submitted one Level entities details of contract 1 VBP contract to DOH including data collection Facilities and MCOs Facilities will receive methods and physician expected to have agreed determination on whether network on risk/shared savings, contract meets requirements quality metrics Contracts should be on Sep 29 nearing readiness for For non-TCGP Facilities to begin engaging execution arrangements, evaluate with MCOs or contracting the estimated Medicaid entity with whom they have

dollars with the

arrangement



VBP Contracting Survey

- Survey will be distributed to all VBP QIP facilities on Friday, September 29th
- Completed surveys are due by Wednesday, October 4th
- The survey will be used to assess the progress of VBP QIP Facilities in developing VBP contracts with the MCOs required to meet 80% VBP by April 1, 2018
- DOH will survey again in November and January to monitor VBP QIP Facility efforts and progress



VBP Contract Review for Contract Attestations

Facilities are required to have Level 1 (or higher) VBP contracts with the MCOs required to meet the 80% VBP target by March 30, 2018. The facilities should submit information in accordance with the timeline below.

October 2, 2017 – March 30, 2018

- Contracting MCO must submit new or amended VBP Contract and the following documentation to DOH contracts group for review contract@health.ny.gov:
 - Contract Statement and Certification Form
 - MCO assigned unique identifier (if amended)
 - Standard Clauses, as needed
 - Off Menu Supplemental Checklist, as required
 - Contract Attestation (sent by facility to DOH and paired MCO)

May 4, 2018

- DOH contracts group will provide feedback to the contracting MCO and the VBP QIP Facility that either:
- 1. Contract is in alignment with the NYS Roadmap and no further updates are needed.
- 2. Updates are needed and provide feedback on elements that should be updated to meet roadmap requirements.

May 18, 2018

 Contracting MCO submits updated contract along with the updated contract statement and certification form to DOH contracts group.

June 29, 2018

- DOH contracts group makes determination if the contract meets requirements.
- Contracting MCO and VBP QIP Facility are notified of DOH determination.
- VBP QIP paired MCO is also notified of DOH determination.



Off-menu contracts may take DOH additional time to review. Therefore, if there are delays in DOH feedback, paired MCOs should continue paying out funds for attestation. The paired MCO can perform a reconciliation in the future if the requirement is not met.



VBP QIP Roles and Responsibilities

PPS Role	 Provide support (non-financial) and guidance to participating facilities Flow funds from the MCO to the facility
Facility Role	 Report quality measure performance to the MCOs Regularly review your FTP to ensure implementation is in accordance with contractual obligations to move towards VBP Improve quality of care Achieve financial sustainability over duration of the program Engage in continuous communication with PPS and MCOs regarding obstacles and successes
DOH Role	 Provide MCOs with criteria for funds distribution and program administration that aligns with NYS VBP Roadmap Fund the program through MCO Per Member Per Month (PMPM) rate increases inclusive of an administrative fee Provide contracting guidelines and recommendations Monitor the facilities' sustainability plans and status Communicate facilities' success/risk with OPCHSM
MCO Role*	 Validate reporting Communicate with the facility and PPS Collaborate Oversee program Distribute and report on funds

^{*}MCOs are NOT responsible for ensuring that the facilities achieve the goals of VBP QIP

Contracting Checklist

DOH has developed an on-menu checklist to assist MCOs and facilities with successful completion and submission of VBP contracts and to increase the efficiency of contract review. The checklist will provide guidance and ensure compliance in each of the following categories

1 Type of Arrangement

5 Attribution

2 Definition and Scope of Services

6 Target Budget

3 Quality Measures/Reporting

- Social Determinants of Health
- 4 Risk Level and Shared Savings/Losses
- 8 Contracting with Community Based Organizations



VBP QIP Program Reminders



Key Deliverable Deadlines

- Beginning DY3 Q3, Pay for Performance payments begin. Payment will be tied to reporting baselines to the MCO in DY2 Q4
- Quality measure performance will drive payment beginning in DY3 Q4 (with the exception of sepsis)

Measurement Quarter	DY2 Q4	DY3 Q1	
Measurement Period	4/1/2016 — 3/31/2017	7/1/2017 — 6/30/2017	
MCO Reviews Achievement, Prepares Payment	9/30/2017	12/31/2017	
MCO Releases Monthly Payments for QIT Achievement	Oct – Dec (2017)	Jan – Mar (2018)	
MCO Sends P4P Performance Report to DOH	1/31/2018	4/30/2018	



VBP QIP Timeline

Description of Event/Task	Deadline/Date Completed	Responsible Party
Review and approve DY2 Q4 QITs and begin preparing payment	Friday, September 29, 2017	MCO
DY3 Q2 measurement period ends	Saturday, September 30, 2017	NA
Begin dispersing funds related to DY2 Q4 achievement of QITs	Monday, October 02, 2017	MCO
Collect and report DY3 Q1 P4P data to MCO	Tuesday, October 31, 2017	Facility
Review and approve DY3 Q1 QITs and begin preparing payment	Friday, December 29, 2017	MCO
DY3 Q3 measurement period ends	Sunday, December 31, 2017	NA



Deliverable Submission

Report	Submitted by	Submitted to	Frequency	Location
VBP QIP Contracts	MCOs	DOH	As updated	contract@health.ny.gov
Remaining contracts and contract attestations due by April 1, 2018	Facilities	MCOs & DOH	April 1, 2018	vbp_qip@health.ny.gov
Documentation of achievement of P4P metrics	Facilities	MCOs	Quarterly	VBP QIP paired MCO
Documentation of approval of P4P deliverables, supporting documentation, and payment date	MCOs	DOH	One month after payment quarter	vbp_qip@health.ny.gov
VBP Contracts, Contract Statement and Certification form	Contracting MCOs	DOH	As completed or updated	contract@health.ny.gov



Important Information

VBP Support Materials

VBP Resource Library:

- Path: DSRIP Homepage → Value Based Payment Reform → VBP Resource Library
- Link: https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/vbp_library

VBP Website:

- Path: DSRIP Homepage → Value Based Payment Reform
- Link: https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/vbp_reform



Thank you for your continued support with VBP QIP!

- The next VBP QIP Update Webinar is scheduled for October 18th, 2017
- For questions on VBP QIP quality measures, please email the SPARCS BML at sparcs.submissions@health.ny.gov with "VBP QIP Measures" in the title.
- For questions on VBP QIP financing, please contact bmcr@health.ny.gov.
- For other questions on VBP QIP, please contact the VBP QIP inbox at vbp_qip@health.ny.gov.
- For questions regarding VAP or VAPAP, please contact vapap@health.ny.gov.

