

DSRIP Meeting Agenda

Date and Time	5/13/16, 3:00-4:00PM	Meeting Title	NYP PPS Finance Committee
Location	MJHS, 39 Broadway, 3 rd Floor, Board Room	Facilitators	Jay Gormley, Brian Kurz
Go to Meeting	https://global.gotomeeting.com/join/809392461	Conference Line	Dial +1 (646) 749-3122 Access Code: 809-392-461

Invitees	
Ilana Avinari (Methodist)	Alan Wengrofsky (Community Healthcare Network)
Dan Del Bene (SPOP)	Diomedes Carrasco (NMPP)
Steve Zhou (Village Care)	Co-Chair: Jay Gormley (MJHS)
Daniel Johansson (ACMH)	NYP Co-Chair: Brian Kurz
Fay Pinto (Elizabeth Seton Center for Pediatrics)	
David Grayson (ArchCare/Calvary)	

Meeting Objectives	Time
1. Review action items from last meeting	2 mins
2. Update on Value-Based Payment Workgroup/Assessment	5 mins
3. Review of Financial Health Assessment Results-to-Date	15 mins
4. DSRIP Year 1, Expenditures vs. Revenue	15 mins
5. Overview of Performance Measures	15 mins
6. Identify Action Items	2 mins

Action Items				
Description	Owner	Start Date	Due Date	Status
Distribute meeting materials from 4/8/2016	L. Alexander	4/8/2016	4/12/2016	Complete
Review results of Financial Health Assessment at next meeting	B. Kurz/J. Gormley	4/8/2016	5/13/2016	Not started
Provide update on VBP workgroup and survey at next meeting	B. Kurz/J. Gormley	4/8/2016	5/13/2016	Not started

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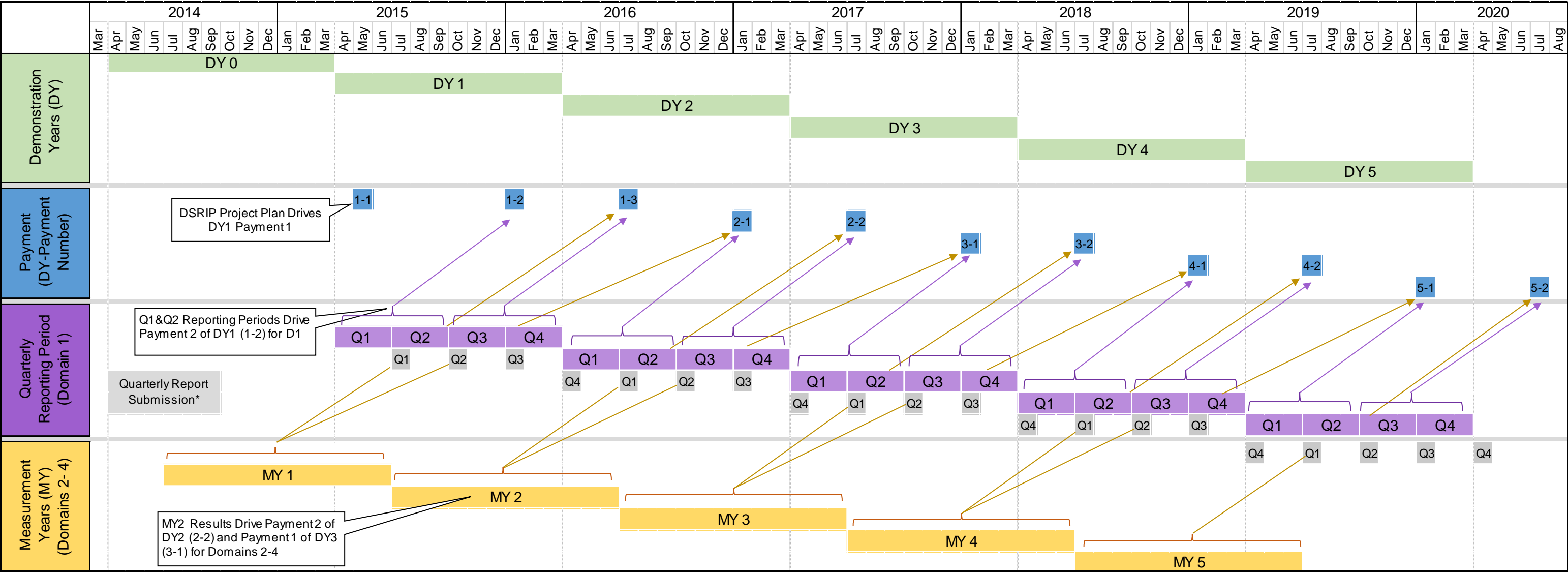
Invitees	
Isaac Kastenbaum (NYP)	Barbara Linder (NYP)
Lauren Alexander (NYP)	Co-Chair: Jay Gormley (MJHS)
Steve Zhou (Village Care)	NYP Co-Chair: Brian Kurz
Daniel Johansson (ACMH)	
Mary Blyth (NYP)	
David Grayson (ArchCare/Calvary)	

Meeting Objectives	Time
1. Review action items from last meeting	2 mins
2. Update on Value-Based Payment Workgroup/Assessment	5 mins
3. Review of Financial Health Assessment Results-to-Date	15 mins
4. DSRIP Year 1, Expenditures vs. Revenue	15 mins
5. Overview of Performance Measures	15 mins
6. Identify Action Items	2 mins

Action Items				
Description	Owner	Start Date	Due Date	Status
Distribute meeting materials from 5/13/2016	L. Alexander	5/13/2016	6/10/2016	Complete
Develop line of follow-up questions for those who scored below thresholds on FHA	B. Kurz/J. Gormley	5/13/2016	6/10/2016	In progress
Schedule meetings with organizations who scored below thresholds on FHA	B. Kurz/J. Gormley/PMO	5/13/2016	6/10/2016	In Progress
Develop framework for next round of presentations to Finance Committee	B. Kurz/J. Gormley/PMO	5/13/2016	6/10/2016	Complete
F/U on whether current Year 1 surplus is in line with anticipated carry forward	I. Kastenbaum	5/13/2016	7/8/2016	In Progress

DSRIP Timelines

Relating Demonstration Years, Payments, Quarterly Reporting Periods and Measurement Years



Publication date: January 29th, 2016. Version 1.
* Quarterly reports are generally due on the last day of the month following the close of the quarter

Domain	ID	Measure Name	Specification Version	NQF #	Projects Associated with Measure	Numerator Description	Denominator Description	Reporting Responsibility	Payment: DY 2 and 3	Payment: DY 4 and 5
Two	2-1	Potentially Avoidable Emergency Room Visits	3M	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of preventable emergency visits as defined by revenue and CPT codes	Number of people (excludes those born during the measurement year) as of June 30 of measurement year	NYS DOH	P4R	P4P
Two	2-2	Potentially Avoidable Readmissions	3M	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of readmission chains (at risk admissions followed by one or more clinically related readmission within 30 days of discharge)	Number of people as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-3	PQI 90 - Composite of all measures	AHRQ 4.4	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of admissions which were in the numerator of one of the adult prevention quality indicators	Number of people 18 years and older as of June 30 of measurement year	NYS DOH	P4R	P4P
Two	2-4	PDI 90 - Composite of all measures	AHRQ 4.4	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of admissions which were in the numerator of one of the pediatric prevention quality indicators	Number of people 6 to 17 years as of June 30 of measurement year	NYS DOH	P4R	P4P
Two	2-5	Percent of total Medicaid provider reimbursement received through sub- capitation or other forms of non- FFS reimbursement	NA	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Dollars paid by MCO under value based arrangements	Total Dollars paid by MCOs	NYS DOH	P4R	P4R
Two	2-6	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	NA	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of Eligible qualified entities with participation agreement with a RHIO, meeting meaningful use criteria, and able to participate in bidirectional exchange	Number of qualified entities in the PPS network	NYS DOH	P4R	P4R
Two	2-7	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	NA	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of PCP meeting PCMH or Advance Primary Care Standards	Number of PCP providers in the PPS network	PPS	P4R	P4R
Two	2-8	Primary Care - Usual Source of Care - Q2	1351a_C&G CAHPS Adult Primary Care	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Percent of Reponses Yes to Q2	All Responses	NYS DOH	P4R	P4P
Two	2-9	Primary Care - Length of Relationship - Q3	1351a_C&G CAHPS Adult Primary Care	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Percent of Responses at least 1 year or longer	All Responses	NYS DOH	P4R	P4P
Two	2-10	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of adults who had an ambulatory or preventive care visit during the measurement year	Number of adults ages 20 to 44 as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-11	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of adults who had an ambulatory or preventive care visit during the measurement year	Number of adults ages 45 to 64 as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-12	Adult Access to Preventive or Ambulatory Care - 65 and older	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of adults who had an ambulatory or preventive care visit during the measurement year	Number of adults ages 65 and older as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-13	Children's Access to Primary Care - 12 to 24 months	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of children who had a visit with a primary care provider during the measurement period	Number of children ages 12 to 24 months as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-14	Children's Access to Primary Care - 25 months to 6 years	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of children who had a visit with a primary care provider during the measurement period	Number of children ages 25 months to 6 years as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-15	Children's Access to Primary Care - 7 to 11 years	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of children who had a visit with a primary care provider during the measurement period or year prior	Number of children ages 7 to 11 years as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-16	Children's Access to Primary Care - 12 to 19 years	HEDIS 2015	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number of children who had a visit with a primary care provider during the measurement period or year prior	Number of children ages 12 to 19 years as of June 30 of the measurement year	NYS DOH	P4R	P4P
Two	2-17	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	1351a_C&G CAHPS Adult Primary Care	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number responses 'Usually' or 'Always' got appt for urgent care or routine care as soon as needed , got answers the same day if called during the day or response as soon as needed if called after hours	Number who answered they called for appointments or called for information	NYS DOH	P4R	P4P
Two	2-18	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	1351a_C&G CAHPS Adult Primary Care	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number responses 'Usually' or 'Always' that clerks and receptionists were helpful and courteous and respectful	All responses	NYS DOH	P4R	P4P
Two	2-19	Medicaid Spending on ER and Inpatient Services		NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Total spending on ER and IP services	Per member per month of members attributed to the PPS as of June of the measurement year	NYS DOH	P4R	P4R
Two	2-20	Medicaid spending on Primary Care and community based behavioral health care		NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Total spending on Primary Care and Community Behavioral Health care as defined by MMCOR categories	Per member per month of members attributed to the PPS as of June of the measurement year	NYS DOH	P4R	P4R
Two	2-21	H-CAHPS - Care Transition Metrics (Q23, 24, and 25)	V9.0	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Sum of Hospital specific results for the Care Transition composite	Hospitals with H-CAHPS participating in the PPS network	NYS DOH	P4R	P4P

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Two	2-22	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Adult Medicaid 5.0H	NA	2.a.i - 2.a.v, 2.b.i - 2.b.ix, 2.c.i - 2.c.ii	Number responses 'Usually' or 'Always' that doctor informed and up- to-date about care received from other providers	All responses with member seeing more than one provider	NYS DOH	P4R	P4P
Three	3-1	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis)	3M	NA	3.a.i - 3.a.iv	Number of preventable emergency visits as defined by revenue and CPT codes	Number of people with a BH diagnosis (excludes those born during the measurement year) as of June 30 of measurement year	NYS DOH	P4P	P4P
Three	3-2	Antidepressant Medication Management - Effective Acute Phase Treatment	HEDIS 2015	0105	3.a.i - 3.a.iv	Number of people who remained on antidepressant medication during the entire 12-week acute treatment phase	Number of people 18 and older who were diagnosed with depression and treated with an antidepressant medication	NYS DOH	P4P	P4P
Three	3-3	Antidepressant Medication Management - Effective Continuation Phase Treatment	HEDIS 2015	0105	3.a.i - 3.a.iv	Number of people who remained on antidepressant medication for at least six months	Number of people 18 and older who were diagnosed with depression and treated with an antidepressant medication	NYS DOH	P4P	P4P
Three	3-4	Diabetes Monitoring for People with Diabetes and Schizophrenia	HEDIS 2015	1934	3.a.i - 3.a.iv	Number of people who had both an LDL-C test and an HbA1c test during the measurement year	Number of people, ages 18 to 64 years, with schizophrenia and diabetes	NYS DOH	P4P	P4P
Three	3-5	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	HEDIS 2015	1932	3.a.i - 3.a.iv	Number of people who had a diabetes screening test during the measurement year	Number of people, ages 18 to 64 years, with schizophrenia or bipolar disorder, who were dispensed an antipsychotic medication	NYS DOH	P4P	P4P
Three	3-6	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	HEDIS 2015	1933	3.a.i - 3.a.iv	Number of people who had an LDL-C test during the measurement year	Number of people, ages 18 to 64 years, with schizophrenia and cardiovascular disease	NYS DOH	P4P	P4P
Three	3-7	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	HEDIS 2015	0108	3.a.i - 3.a.iv	Number of children who had one follow-up visit with a practitioner within the 30 days after starting the medication	Number of children, ages 6 to 12 years, who were newly prescribed ADHD medication	NYS DOH	P4R	P4P
Three	3-8	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	HEDIS 2015	0108	3.a.i - 3.a.iv	Number of children who, in addition to the visit in the Initiation Phase, had at least 2 follow-up visits in the 9-month period after the initiation phase ended	ages 6 to 12 years, who were newly prescribed ADHD medication and remained on the medication for 7 months	NYS DOH	P4R	P4P
Three	3-9	Follow-up after hospitalization for Mental Illness - within 7 days	HEDIS 2015	0576	3.a.i - 3.a.iv	Number of discharges where the patient was seen on an ambulatory basis or who was in intermediate treatment with a mental health provider within 7 days of discharge	Number of discharges between the start of the measurement period to 30 days before the end of the measurement period for patients ages 6 years and older, who were hospitalized for treatment of selected mental health disorders	NYS DOH	P4P	P4P
Three	3-10	Follow-up after hospitalization for Mental Illness - within 30 days	HEDIS 2015	0576	3.a.i - 3.a.iv	Number of discharges where the patient was seen on an ambulatory basis or who was in intermediate treatment with a mental health provider within 7 days of discharge	Number of discharges between the start of the measurement period to 30 days before the end of the measurement period for patients ages 6 years and older, who were hospitalized for treatment of selected mental health disorders	NYS DOH	P4P	P4P
Three	3-11	Screening for Clinical Depression and follow-up		0418	3.a.i - 3.a.iv	Number of people screened for clinical depression using a standardized depression screening tool, and if positive, a follow-up plan is documented on the date of the positive screen	Number of people with a qualifying outpatient visit who are age 18 and older	PPS and NYS DOH	P4R	P4P
Three	3-12	Adherence to Antipsychotic Medications for People with Schizophrenia	HEDIS 2015	1879	3.a.i - 3.a.iv	Number of people who remained on an antipsychotic medication for at least 80% of their treatment period	Number of people, ages 19 to 64 years, with schizophrenia who were dispensed at least 2 antipsychotic medications during the measurement year	NYS DOH	P4P	P4P
Three	3-13	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	HEDIS 2015	0004	3.a.i - 3.a.iv	Number of people who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter, or partial hospitalization within 14 days of the index episode	Number of people age 13 and older with a new episode of alcohol or other drug (AOD) dependence	NYS DOH	P4P	P4P

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Three	3-14	Engagement of Alcohol and Other Drug Dependence Treatment (Initiation and 2 visits within 44 days)	HEDIS 2015	0004	3.a.i - 3.a.iv	Number of people who initiated treatment AND who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit	Number of people age 13 and older with a new episode of alcohol or other drug (AOD) dependence	NYS DOH	P4P	P4P
Three	3-15	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	HEDIS 2015	0027	3.b.i - 3.b.ii, 3.c.i - 3.c.ii, 3.e.i, 3.h.i	Number of respondents who were advised to quit	Number of respondents, ages 18 years and older, who smoke or use tobacco some days or every day	NYS DOH	P4R	P4P
Three	3-16	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	HEDIS 2015	0027	3.b.i - 3.b.ii, 3.c.i - 3.c.ii, 3.e.i, 3.h.i	Number of respondents who discussed or were recommended cessation medications	Number of respondents, ages 18 years and older, who smoke or use tobacco some days or every day	NYS DOH	P4R	P4P
Three	3-17	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	HEDIS 2015	0027	3.b.i - 3.b.ii, 3.c.i - 3.c.ii, 3.e.i, 3.h.i	Number of respondents who discussed or were provided cessation methods or strategies	Number of respondents, ages 18 years and older, who smoke or use tobacco some days or every day	NYS DOH	P4R	P4P
Three	3-38	HIV/AIDS Comprehensive Care : Engaged in Care	QARR 2015	NA	3.e.i	Number of people who had two visits for primary care or HIV related care with at least one visit during each half of the past year	Number of people living with HIV/AIDS, ages 2 years and older	NYS DOH	P4P	P4P
Three	3-39	HIV/AIDS Comprehensive Care : Viral Load Monitoring	QARR 2015	NA	3.e.i	Number of people who had two viral load tests performed with at least one test during each half of the past year	Number of people living with HIV/AIDS, ages 2 years and older	NYS DOH	P4P	P4P
Three	3-40	HIV/AIDS Comprehensive Care : Syphilis Screening	QARR 2015	NA	3.e.i	Number of people who were screened for syphilis in the past year	Number of people living with HIV/AIDS, ages 19 years and older	NYS DOH	P4P	P4P
Three	3-41	Cervical Cancer Screening	HEDIS 2015	0032	3.e.i	Number of women who had cervical cytology performed every 3 years or women, ages 30 to 64 years, who had cervical cytology/human papillomavirus (HPV) co- testing performed every 5 years	Number of women, ages 24 to 64 years	NYS DOH	P4R	P4P
Three	3-42	Chlamydia Screening (16 - 24 Years)	HEDIS 2015	0033	3.e.i	Number of women who had at least one test for Chlamydia during the measurement year	Number of sexually active women, ages 16 to 24	NYS DOH	P4P	P4P
Three	3-43	Viral Load Suppression	HRSA	2082	3.e.i	Number of people whose most recent viral load result was below 200 copies	Number of people living with HIV/AIDS	PPS and NYS DOH	P4R	P4P
Three	3-52	TBD	UAS-NY	NA	3.g.i - 3.g.ii			NYS DOH	P4R	P4P
Three	3-53	TBD	UAS-NY	NA	3.g.i - 3.g.ii			NYS DOH	P4R	P4P
Three	3-54	TBD	UAS-NY	NA	3.g.i - 3.g.ii			NYS DOH	P4R	P4P
Three	3-55	TBD	UAS-NY	NA	3.g.i - 3.g.ii			NYS DOH	P4R	P4P
Three	3-56	TBD	UAS-NY	NA	3.g.i - 3.g.ii			NYS DOH	P4R	P4P
Four	4-1	Percentage of premature death (before age 65 years)	NYS DOH Vital Statistics	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Number of people who died before age 65 in the measurement period	Number of deaths in the measurement period	NYS DOH	P4R	P4R
Four	4-2	Percentage of premature death (before age 65 years) - Ratio of Black non-Hispanics to White non-Hispanics	NYS DOH Vital Statistics	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Percentage of Black non- Hispanics who died before age 65	Percentage of White non- Hispanics who died before age 65	NYS DOH	P4R	P4R
Four	4-3	Percentage of premature death (before age 65 years) - Ratio of Hispanics to White non-Hispanics	NYS DOH Vital Statistics	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Percentage of Hispanics who died before age 65	Percentage of White non- Hispanics who died before age 65	NYS DOH	P4R	P4R
Four	4-4	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	SPARCS	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Number of preventable hospitalizations for people age 18 or older	Number of people age 18 or older	NYS DOH	P4R	P4R
Four	4-5	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years - Ratio of Black non-Hispanics to White non-Hispanics	SPARCS	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Rate of preventable hospitalizations for Black non- Hispanics age 18 or older	Rate of preventable hospitalizations for White non-Hispanics age 18 or older	NYS DOH	P4R	P4R
Four	4-6	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years - Ratio of Hispanics to White non-Hispanics	SPARCS	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Rate of preventable hospitalizations for Hispanics age 18 or older	Rate of preventable hospitalizations for White non-Hispanics age 18 or older	NYS DOH	P4R	P4R
Four	4-7	Percentage of adults with health insurance - Aged 18- 64 years	US Census	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Number of respondents age 18-64 who reported that they had health insurance coverage	Number of people age 18- 64	NYS DOH	P4R	P4R
Four	4-8	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	BRFSS	NA	4.a.i - 4.a.iii, 4.b.i - 4.b.ii, 4.c.i - 4.c.iv, 4.d.i	Number of respondents age 18 or older who reported that they had a regular health care provider	Number of people age 18 or older	NYS DOH	P4R	P4R
Four	4-14	Percentage of cigarette smoking among adults	BRFSS	NA	4.b.i	Number of people age 18 or older who report currently smoking cigarettes	Number of people age 18 or older	NYS DOH	P4R	P4R
Four	4-21	Newly diagnosed HIV case rate per 100,000	NYS HIV Surveillance System	NA	4.c.i, 4.c.ii, 4.c.iv	Number of people newly diagnosed with HIV, regardless of concurrent or subsequent AIDS diagnosis	Number of people	NYS DOH	P4R	P4R

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Four	4-22	Newly diagnosed HIV case rate per 100,000â€”Difference in rates (Black and White) of new HIV diagnoses	NYS HIV Surveillance System	NA	4.c.i, 4.c..ii, 4.c.iv	Rate of Black non-Hispanics newly diagnosed with HIV, regardless of concurrent or subsequent AIDS diagnosis	Rate of White non- Hispanics newly diagnosed with HIV, regardless of concurrent or subsequent AIDS diagnosis	NYS DOH	P4R	P4R
Four	4-23	Newly diagnosed HIV case rate per 100,000â€”Difference in rates (Hispanic and White) of new HIV diagnoses	NYS HIV Surveillance System	NA	4.c.i, 4.c..ii, 4.c.iv	Rate of Hispanics newly diagnosed with HIV, regardless of concurrent or subsequent AIDS diagnosis	Rate of White non- Hispanics newly diagnosed with HIV, regardless of concurrent or subsequent AIDS diagnosis	NYS DOH	P4R	P4R

Tab	Requirement Type	Milestone	Target Completion Dates	Calendar Date	Documentation	Initiating Committee	Status
Financial Sustainability	Domain 1 Process Measure	Finalize Compliance Plan consistent with New York State Social Services Law 363-d	DY1, Q3	12/31/2015	Finalized Compliance Plan (for PPS Lead). Subsequent quarterly reports will require an update on ongoing compliance with 363-d.	Finance	Complete
Financial Sustainability	Domain 1 Process Measure	Finalize PPS finance structure, including reporting structure	DY1, Q3	12/31/2015	PPS finance structure chart / document, signed off by PPS Board. Subsequent quarterly reports will require PPSs to provide minutes of Finance Committee meetings.	Finance	Complete
Governance	Key Issue	Finalize partnership agreements or contracts with CBOs	DY1, Q4	3/31/2016	Signed CBO partnership agreements or contracts. Subsequent quarterly reports to require minutes of meetings with CBOs.	Finance	Complete
Financial Sustainability	Domain 1 Process Measure	Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	DY1, Q4	3/31/2016	Network financial health current state assessment (to be performed at least annually). The PPS must: - identify those providers in their network that are financially fragile, including those that have qualified as IAAF providers; -- define their approach for monitoring those financially fragile providers, which must include an analysis of provider performance on the following financial indicators: days cash on hand, debt ratio, operating margin and current ratio; -- include any additional financial indicators that they deem necessary for monitoring the financial sustainability of their network providers In subsequent quarterly reports (i.e. between the annual assessment) PPSs will be required to provide an update on: --the financial status of those providers identified as financially fragile, including those that qualified as IAAF providers; and how their status impacts their ability to deliver services -- the identification of any additional financially fragile providers; and -- the efforts undertaken to improve the financial status of those providers.	Finance	Complete
Financial Sustainability	Domain 1 Process Measure	Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types and functions, and MCO strategy.	DY2, Q2	9/30/2016	Value-based payment plan, signed off by PPS board Subsequent quarterly reports will require updates on implementation of that plan.	Finance	In Progress, On Track
Funds Flow	Domain 1 Process Measure	Complete funds flow budget and distribution plan and communicate with network	DY1, Q4	3/31/2016	Funds Flow Budget and Distribution Plan, signed off by your Finance Committee, including details of your approach to funds flow on a whole-PPS and project-by-project basis; evidence of involvement of provider network in developing funds flow methodology. Subsequent quarterly reports will require updates to the budget and funds flow tables contained in this template.	Finance	Complete
Financial Sustainability	Domain 1 Process Measure	Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	TBD	TBD	Value-based payment plan, signed off by PPS board Subsequent quarterly reports will require updates on implementation of that plan.	Finance	Not started